FORTY-SEVENTH ANNUAL REPORT

OF THE

GENERAL BOARD OF COMMISSIONERS IN LUNACY FOR SCOTLAND.

Presented to both Houses of Parliament by Command of His Majesty.

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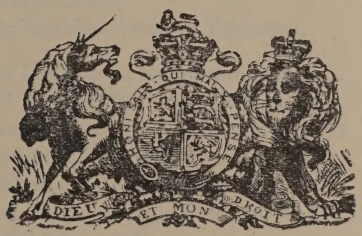
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FORTY-SEVENTH ANNUAL REPORT.

TO THE MOST HONOURABLE

THE MARQUESS OF LINLITHGOW, K.T.,

His Majesty's Secretary for Scotland.

GENERAL BOARD OF COMMISSIONERS IN LUNACY FOR SCOTLAND, EDINBURGH.

February 1905.

MY LORD MARQUESS,

We have the honour to lay before you our Forty-seventh Annual Report on the Condition and Management of Lunatics and Lunatic Asylums in Scotland.

In our Forty-second Annual Report we presented, in accordance with our custom at intervals of five years, a detailed retrospect of the changes which had taken place in the number and distribution of the insane since 1st January 1858. As the end of last year marks the close of another quinquenniad, we include in the present Report not only a statistical statement of the results of the past year, but also a comparison of the statistics of the quinquenniad 1900–04 with those of previous quinquenniads. (See page lxvii.)

Quinquennial Retrospect.

I. NUMBER AND DISTRIBUTION OF THE INSANE AT 1ST JANUARY 1905.

On 1st January of the present year, exclusive of insane persons maintained at home by their natural guardians, there were in Scotland 17,241 insane persons of whom we had official cognisance, including the inmates of Training Schools for Imbecile Children and of the Lunatic Department of the General Prison at Perth. Of these, 2551 were maintained from private sources, 14,640 by parochial rates, and 50 at the expense of the State. As the total number at 1st January, 1904, was 16,894, an increase has taken place during the past year of 347.

Number and Distribution of the Insane at 1st January 1905.

The following Table shows the number and distribution of the insane of each sex in the different classes of establishments and in private dwellings at 1st January 1905, distinguishing between private and pauper patients:—

Number of Lunatics at 1st *January* 1905.

Mode of Distribution.	Male.	Female.	Total.	Private.			Pauper.		
				M.	F.	T.	M.	F.	T.
In Royal Asylums, ...	1,753	2,031	3,784	853	994	1,847	900	1,037	1,937
,, District Asylums, ...	4,313	4,267	8,580	127	157	284	4,186	4,110	8,296
,, Private Asylums, ...	42	81	123	42	81	123	...	...	...
,, Parochial Asylums, *i.e.* Lunatic Wards of Poorhouses with unrestricted Licenses, ...	254	266	520	...	...	...	254	266	520
,, Lunatic Wards of Poorhouses with restricted Licenses, . . .	501	446	947	...	...	...	501	446	947
,, Private Dwellings, ...	1,158	1,671	2,829	44	81	125	1,114	1,590	2,704
	8,021	8,762	16,783	1,066	1,313	2,379	6,955	7,449	14,404
,, Lunatic Department of General Prison, .	46	4	50	...	...	...	...	...	...
,, Training Schools, ...	260	148	408	112	60	172	148	88	236
Totals,	8,327	8,914	17,241	1,178	1,373	2,551	7,103	7,537	14,640

Statistics of Lunacy for the year 1904.

The following differences appear in the manner of distribution of *registered* * lunatics at 1st January 1905, when compared with what it was at 1st January 1904:—

Changes in Number and Distribution during 1904.

In Royal Asylums there is an increase of 67 private patients and a decrease of 218 pauper patients.

In District Asylums there is a decrease of 37 private patients and an increase of 707 pauper patients.

In Private Asylums there is a decrease of 2 in the number of private patients.

In Parochial Asylums there is an increase of 12 pauper patients.

In Lunatic Wards of Poorhouses there is a decrease of 205 pauper patients.

The decrease in the number of pauper patients in Royal Asylums and in Lunatic Wards of Poorhouses and their increase in District Asylums is due mainly to the transference during the year of many patients from the Edinburgh and Aberdeen Royal Asylums to the newly-opened District Asylums of Edinburgh and Aberdeen, and also to the closing of Lunatic Wards of Poorhouses at Aberdeen and Dundee, the inmates of which were removed to the Aberdeen and Dundee District Asylums.

In Private Dwellings there is a decrease of 2 private patients and an increase of 46 pauper patients.

The general results during 1904, as compared with 1903, are, in regard to *registered* lunatics, as follows:—(1) There was a total increase of 368, due to an increase of private patients by 26 and an increase of pauper patients by 342. (2) The total increase of 368 arises from an increase of the number in establishments by 324, and an increase of the number in private dwellings by 44. (3) The increased number of 324 in establishments arose from an increase of 28 private patients and an increase of 296 pauper patients. Of pauper patients in establishments, the average increase during the preceding five years was 261, so that the increase of 296 during the year 1904 has been somewhat above the average increase of that quinquenniad. (4) All pauper lunatics in establishments continue to be provided for in institutions of a public character.

In the number of non-registered lunatics the following changes occurred during 1904:—

In the Lunatic Department of the General Prison the number is 3 less than last year.

In Training Schools for Imbecile Children the number is 18 less than last year.

Of the increase during the year of 296 pauper lunatics in establishments, the County of Lanark contributes 182, or over 60 per cent. of the whole. The largest other contributors to the increase are Edinburgh with 62 and Aberdeen with 57. Forfarshire, on the other hand, shows the substantial fall of 63, due, no doubt, to the vigour with which the system of boarding out suitable patients has been followed by the parish of Dundee. Twelve of the counties of Scotland record the number as having remained stationary or as having fallen during the year, and twenty-one

* The inmates of Training Schools for Imbeciles and of the Lunatic Department of the General Prison are recorded in separate books, and, not being on the Board's General Register of Lunatics are not included in this statement.

Statistics of Lunacy for the Year 1904.

show an increase, more or less slight, with the exception of those already mentioned.

Changes from the Pauper to the Private Class, and *vice versâ*.

Changes from Pauper to Private Class, and *vice versa*

It must be kept in view, in connection with the statistical Tables giving the number of lunatics classified into private and pauper patients, that each patient does not necessarily continue till his discharge in the class to which he belonged on being placed on the Board's register. The results shown depend partly on the number of persons who, while continuing on the Board's register, cease to be private patients and become paupers, and *vice versâ*. The following tabular statement shows the average number of pauper patients who have become private patients, and of private patients who have become pauper patients, for the quinquenniads 1885–89 1890–94, and 1895–99, and the numbers for the subsequent years:—

Years.	Number of Registered Patients transferred from Pauper to Private Class.	Number of Registered Patients transferred from Private to Pauper Class.
1885–89, } Average Numbers {	23	42
1890–94, } Average Numbers {	22	41
1895–99, } Average Numbers {	32	45
1900, ...	28	46
1901, ...	20	34
1902, ...	27	49
1903, ...	32	43
1904, ...	34	70

Establishments for Lunatics.

Establishments for Lunatics.

Under the term Establishments, as used in this Report, we include Royal, District, Private, and Parochial Asylums, Lunatic Wards of Poorhouses, Training Schools for Imbecile Children, and the Lunatic Department of the General Prison. But it is necessary to point out that the Tables in the Appendix take no account of figures referring either to the Training Schools or to the General Prison, except where the contrary is specially stated.

Admissions to Establishments.

Admissions to Establishments.

(1) Direct Admissions.

(1) *Admissions directly under a Sheriff's Order, the Sanction of the Board, or other Statutory Authority.*

In arriving at the number of persons admitted to establishments who thereby add to the gross number of asylum patients, the

number of admissions which refer to a mere transfer from one establishment to another must be deducted. In Table VII. the number of admissions for each year is therefore given after deducting transfers; and it shows (1) that the number of private patients admitted during last year was 563, being 91 less than in the preceding year, and six less than the average for the quinquenniad 1900–04; and (2) that the number of pauper patients admitted was 3091, being 118 more than the number during the preceding year, and 83 more than the average for the quinquenniad 1900–04. Statistics of Lunacy for 1904.

(2) *Admissions by Transfer.*

(2) Admissions by Transfer.

It will be seen from Table VI. that the number of patients transferred from one establishment to another during 1904 was 943, which is 49 more than the number transferred during the preceding year, and 261 above the average for the five years 1900–04. The greater part of the number transferred arose through the transference, as already explained, of patients to the newly-opened District Asylums of Edinburgh and Aberdeen, and the closing of certain Lunatic Wards of Poorhouses and the removal to asylums of their insane inmates. The number of pauper patients transferred was, as it always is, larger in proportion to the total admissions than the number of private patients transferred. This is due to the fact that private patients are usually placed at once in the asylums in which it is intended they should stay during their whole term of asylum residence; while pauper patients are frequently placed, in the first instance, in the asylums of the districts in which they are resident, and are afterwards removed to the asylums of the districts to which they belong. The following tabular statement shows the transfers which occurred. They were authorised in 220 instances by Sheriffs, and in 723 by the Board.

Removed from	To Royal and District Asylums.				To Private Asylums.				To Parochial Asylums.		To Lunatic Wards of Poorhouses.		Total Transfers.	
	Private.		Pauper.		Private.		Pauper.		Pauper.		Pauper.		Private.	Pauper.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Royal and District Asylums,	38	30	257	226	...	1	...	...	6	6	51	54	69	600
Private Asylums, . .	2	1	...	...	...	...	...	...	...	...	...	...	3	...
Parochial Asylums, . .	...	...	10	7	...	...	...	...	1	...	7	...	...	25
Lunatic Wards of Poorhouses, ...	...	...	113	121	...	...	...	...	...	...	6	6	...	246
Totals, . .	40	31	380	354	...	1	...	...	7	6	64	60	72	871

(3) *Admission of Voluntary Patients.*

(3) Admission of Voluntary Patients to Establishments.

Voluntary patients are persons who, with the sanction of the Board, granted on a simple application signed by the patient, voluntarily enter asylums for treatment of mental disorder, but whose mental

Statistics of Lunacy for 1904.

condition is not such as to render it legal to grant certificates of insanity in their case. They cannot be detained for more than three days after giving notice of their intention or desire to leave. They are not registered as lunatics, but a record is made of their names and other particulars regarding them. The whole number of such persons admitted into asylums in 1904 was 66. The average number admitted for the ten years 1895–1904 was 81. The number resident at 1st January 1905 was 75.

We have for many years been able to state that nothing has occurred to indicate any difficulty or disadvantage traceable to the presence of this class of patients in asylums; and we continue to be of opinion that it is a useful provision of the law which permits persons who desire to place themselves under care in an asylum to do so in a way which is not attended with troublesome or disagreeable formalities. At the visits of the Medical Commissioners to asylums all voluntary inmates are seen, and they have then an opportunity of making statements in regard to their position, should they desire to make any. When there is reason to suppose that they in any way fail to understand the conditions of their residence, these conditions are explained to them.

DISCHARGES FROM ESTABLISHMENTS.

Discharges from Establishments.

The remark we made, when speaking of the admissions to establishments, in regard to the necessity for the exclusion of such admissions as were merely transfers from one establishment to another, is applicable also to the discharges from establishments. The general statistics of the discharges for each year, after deducting transfers, are given in Table VIII. (Appendix A).

(1) *Discharges of the Recovered.*

Discharges from Establishments of Recovered Patients.

It will be seen from Table VIII. of Appendix A that there were 244 private patients discharged recovered during 1904, which is 30 less than the number for the preceding year, and 8 below the average for the five years 1900–04. The number of pauper patients discharged recovered was 1273, which is 18 below the number for the preceding year, and 18 less than the average for the five years 1900–04. Table IX. (Appendix A) shows the proportion of recoveries per cent. of the numbers admitted into each class of establishment. The following tabular statement shows these percentages for the quinquenniads 1890–94 and 1895-99, and for the five subsequent years:—

Classes of Establishments.	Recoveries per cent. of Admissions.						
	1890-94.	1895-99.	1900.	1901.	1902.	1903.	1904.
In Royal and District Asylums,	39	37	38	39	40	39	33
,, Private Asylums, . .	38	38	44	43	47	40	54
,, Parochial Asylums, . .	43	42	60	51	44	50	45
,, Lunatic Wards of Poorhouses,	7	5	4	4	4	6	9

It will be observed that in this statement private and pauper patients are not distinguished from one another. Regard would require to be had to this fact, and also to the nature of the cases received into each class of establishment, and even into each individual establishment, before these percentages could be accurately appreciated. Very erroneous inferences might be drawn from the figures if due weight were not given to these and other circumstances which have been discussed in previous Reports.

(2) *Discharges of the Unrecovered.*

The number of private patients discharged unrecovered, excluding transfers, during 1904, was, as shown in Table VIII. (Appendix A), 132, which is 4 above the average of the five years 1900–04. The number of pauper patients discharged unrecovered was 470, which is 17 above the number so discharged in the preceding year, and 57 above the average for the five years 1900–04.

The following tabular statement shows the different modes in which the discharge of unrecovered patients took place during the year 1904:—

DISCHARGES OF THE UNRECOVERED.

MODES OF DISCHARGE.	Number of Patients removed Unrecovered from Asylums during 1904.			
	Private.	Pauper.		Total.
		Remained Pauper Lunatics.	Removed from Poor Roll.	
By Friends,	110	...	...	110
,, Minute of Parish Council,	...	178	202	380
,, Escape or Absence over 28 days,	4	1	15	20
,, Expiry of Liberation on Probation,	9	24	8	41
,, Expiry of Emergency Certificate,	1	3	2	6
,, Order of Sheriff under Sec. 92 of 20 & 21 Vic. c. 71,	1	...	...	1
,, Expiry of Interim Order under Sec. 15 of 25 & 26 Vict. c. 54,	...	...	...	...
,, Warrant of Sheriff, and sent to England, Ireland, and other countries,	..	...	36	36
,, Order of Court to undergo Trial,	...	..	...	...
,, Withdrawal of Sheriff's Order,	...	...	...	...
,, Being placed in Perth Prison as a King's Pleasure Lunatic,	...	...	...	..
,, Transference to Training Schools for Imbecile Children,	...	1	...	1
,, Authority of Medical Officer under Sec. 17 of 25 & 26 Vict. c. 54,	1	...	...	1
,, Expiry of Warrant granted under Sec. 6 of 34 & 35 Vict. c. 55,	6	...	...	6
,, Defective admission papers,	...	...	...	...
Totals,	132	207	263	602

Statistics of Lunacy for 1904.

Deaths in Establishments.

Deaths in Establishments.

The number of private patients who died in establishments during 1904 is shown by Table VIII. of Appendix A to have been 164, which is 6 more than in 1903, and 4 less than the average of the five years 1900–04. The number of pauper patients who died was 1047, which is 80 less than in 1903, and 33 above the average of the five years 1900-04.

The following statement, founded upon the figures in Table VIII. of Appendix A, shows the death-rate for private and pauper patients in establishments per cent. of the average number resident for the quinquenniads 1890-94 and 1895-99, and for the five subsequent years :—

Classes of Patients.	Proportion of Deaths per cent. of Number Resident in all Establishments.						
	1890–94.	1895–99.	1900.	1901.	1902.	1903.	1904.
Private Patients, .	7·6	7·2	8·2	8·0	8·5	7·3	7·3
Pauper Patients, .	8·7	8·5	9·2	8·5	9·2	9·9	9·0
Both Classes, .	8·5	8·2	9·0	8·4	9·1	9·5	8·8

The rate of mortality per cent. of the number resident in different classes of establishments for the quinquenniads 1890–94 and 1895–99 and for the years 1900, 1901, 1902, 1903, and 1904 is shown in the following statement taken from Table IX. of Appendix A :—

Classes of Establishments.	Proportion of Deaths per cent. of Number Resident.						
	1890–94.	1895–99.	1900.	1901.	1902.	1903.	1904.
Royal and District Asylums,	8·8	8·4	9·4	8·8	9·5	9·7	8·9
Private Asylums, . .	6·3	9·0	7·3	4·7	11·0	8·7	6·5
Parochial Asylums, . .	9·6	10·5	9·9	9·0	9·9	12·3	12·1
Lunatic Wards of Poor-houses, . . .	4·6	4·5	4·5	5·1	4·3	5·8	4·4

Table X. (Appendix A) gives for each sex the number of deaths, and the number of deaths from various specified causes, in all establishments, for each year from 1870 to 1904, together with the absolute annual average number of deaths from each cause, and the average percentage of deaths from each cause, during each period of five years.

Table XXII. of Appendix A shows the number of deaths, from the various causes specified, in each establishment during the past year.

Removals from Establishments on Statutory Probation.

Removals on Probation.

At 1st January 1904, 88 patients were absent from asylums on probation, with the sanction of the Board. Of these, 45 have

Statistics of Lunacy for 1904.

Removals on Probation.

been finally discharged as recovered, 12 were sent back, and 31 remained on the expiry of the period under the care of friends. In the course of 1904, 149 patients were discharged on probation. Of these, 23 have been finally discharged as recovered, 10 whose period of probation has expired remain under the care of friends, 30 have been returned to asylums, and 1 died. The number still on probation at the close of the year was 85.

The following statement shows the average number of patients liberated on probation in each period of ten years from their authorisation in 1862 to 1902, and the number so liberated for the two subsequent years:—

Year.	Number of Patients Liberated on Probation.
1862–3–72, Average Numbers,	130
1873–82, Average Numbers,	118
1883–92, Average Numbers,	122
1893–1902, Average Numbers,	139
1903,	163
1904,	149

Of the 5401 patients liberated on probation since 1862, 1188, or 22 per cent., were replaced, before the expiry of the period of probation, in the asylums from which they had been removed.

The numbers liberated on probation from the different establishments in 1904 are shown in the following statements:—

Aberdeen Royal Asylum,	17	Saughtonhall Private Asylum,	1
Aberdeen District Asylum,	2	Westermains Private Asylum,	0
Argyll District Asylum,	9	Greenock Parochial Asylum,	0
Ayr District Asylum,	4	Paisley Parochial Asylum, Craw Road,	0
Banff District Asylum,	3	Paisley Parochial Asylum, Riccarts-bar,	0
Crichton Royal Institution,	16	Aberdeen East Poorhouse,	0
Dundee Royal Asylum,	0	Aberdeen West Poorhouse,	0
Dundee District Asylum,	1	Buchan Poorhouse,	0
Edinburgh Royal Asylum,	5	Cunninghame Poorhouse,	0
Edinburgh District Asylum,	1	Dumbarton Poorhouse,	0
Elgin District Asylum,	0	Dundee East Poorhouse,	0
Fife District Asylum,	1	Dundee West Poorhouse,	0
Glasgow Royal Asylum,	9	Edinburgh Poorhouse,	0
Glasgow District Asylum (Gartloch),	1	Govan Poorhouse,	0
" " " (Woodilee),	0	Hamilton Poorhouse,	0
Govan District Asylum,	1	Inveresk Poorhouse,	0
Haddington District Asylum,	0	Kincardine Poorhouse,	0
Inverness District Asylum,	20	Linlithgow Poorhouse,	0
Kirklands Asylum,	1	Old Monkland Poorhouse,	0
Lanark District Asylum,	0	Perth Poorhouse,	0
Midlothian District Asylum,	13	Wigtown Poorhouse,	0
Montrose Royal Asylum,	3		
Murray's Royal Asylum,	0		
Perth District Asylum,	2		
Roxburgh District Asylum,	25		
Stirling District Asylum,	14	Total,	149
Mavisbank Private Asylum,	0		

Statistics of Lunacy for 1904.

Removals on Probation.

In the numbers above given, patients liberated on trial for periods not exceeding twenty-eight days are not included. Such trials can be made without the sanction of the Board, and they are frequently made use of by some Superintendents. The statutory removal on probation is not granted by the Board for a period exceeding one year, and its special use is to permit of the conditional liberation of patients whose fitness for permanent discharge cannot be determined without trial for a longer period than twenty-eight days. It is frequently found that patients who appear while in the asylum to have improved so much that they are fit for private care become unsettled when the influences of the asylum are removed. It is not, however, justifiable to retain permanently in the asylum all patients in whose cases a possibility of such unsettlement is thought to exist. The large majority of patients liberated on probation undergo no deterioration, and many are benefited by the change. By liberating patients on probation there is an opportunity given for testing their fitness for permanent discharge, and they can be replaced in the asylum without the expense attending a Sheriff's order, if they prove unfit. A more frequent use of removal on probation in some establishments would probably lead to a larger number of permanent discharges than takes place at present.

The number of liberations on probation from any particular asylum cannot, however, in all cases be taken as showing the frequency with which trial is made in it of the fitness of unrecovered patients for residence in private dwellings. In some asylums from which few or no discharges on statutory probation take place the removal of unrecovered patients is freely resorted to either by severing their connection with the asylum at once or after the trial of twenty-eight days, which, as already explained, may take place by permission of the Superintendent, and without the authority of the Board.

List of Establishments and Number of Lunatics in Each.

Distribution of Lunatics in Establishments.

Table XV. (Appendix A) shows the number of private and pauper lunatics in each Royal, District, Private, and Parochial Asylum and Licensed Poorhouse on 1st January 1905, and also the number of pauper lunatics from each county in each Royal, District, and Parochial Asylum, and Licensed Poorhouse. With few exceptions, the pauper lunatics of Scotland are disposed of either in asylums erected for them by the Boards of the lunacy districts to which they belong, or in asylums with which such Boards have made contracts.

Sheriffs' Orders.

Orders granted by Sheriffs during the Year.

Table XIX. (Appendix A) gives the statutory return exhibiting the number of orders granted by Sheriffs for the admission of lunatics into any Public, Private, District, or Parochial Asylum, or House, stating the Asylum or House to which such order referred, during the year ending 31st December 1904. The number of orders granted during the year was 3756.

Licences Granted by the Board for Establishments.

Statistics of Lunacy for 1904.

Licences granted by the Board to Asylums and Lunatic Wards of Poorhouses.

Table XX. (Appendix A) gives the statutory return exhibiting the number of licences granted by us for the continuance or establishment of charitable institutions, private asylums, and lunatic wards of poorhouses, and the transfer of any licence from one establishment to another, during the year ending 31st December 1904. The number of licences amounted to 23, and they were granted for the renewal of the licences of 2 charitable institutions, 3 private asylums, and 18 wards or portions of poorhouses set apart for lunatics.

Results of Treatment in Establishments.

Results of Treatment in Establishments.

In the several sections of Table XXI. (Appendix A) we give the average number resident, the number admitted, and the results of treatment for each establishment. We have already alluded to the general results which these Tables exhibit when commenting on Tables VII., VIII., and IX.

Causes of Death in each Establishment.

Table XXII. (Appendix A) gives a classification of the causes of death of those patients who died in establishments during the year 1904, giving each class of establishment and each establishment separately.

Changes among Attendants and Servants in Establishments.

Changes among Attendants and Servants in Establishments.

The whole number of attendants and servants who left, were dismissed, or died, during 1904, was 1038, which is 47 less than the number for the previous year. The number who resigned their situations voluntarily is 792, which is 23 less than last year.

In addition to the 792 who resigned voluntarily, 67 left on account of ill-health, 9 died during their term of service, 14 left without notice, 33 were dismissed for incompetence or unsuitability, 3 on account of services not being longer required, and 120 for misconduct.

We recommend that the administrators of institutions in which changes among attendants occur frequently should enquire carefully into the causes, and should endeavour to remove them by offering increased inducements to good attendants to remain, and to a better class to take service. Our experience tends to show that in the case of men a high class of attendant and security for permanent service are best obtained by increasing the number of married attendants. We therefore recommend, in all cases in which it has not already been done, that comfortable cottages for married attendants should be provided, wherever such accommodation is not to be had in the immediate neighbourhood of the asylum.

It is proper to observe, however, in reference to the figures given above, that we have ascertained that the great bulk of the changes occurs in the case of attendants and servants who have only been a short time in asylum service. As the number of attendants and servants who resigned voluntarily constitutes 76 per cent. of

Statistics of Lunacy for 1904.

Changes among Attendants and Servants in Establishments.

the whole number of changes during the last year, it may be inferred that, although the inducements to enter asylum service are not pecuniarily unattractive to those who seek employment, a large number find the service on trial not to be congenial. This may be due in part to the trying nature of the service, and possibly still more to the general want of freedom inseparable from the discipline of a large institution, which causes a preference to be given to employments, perhaps less well paid, in which the workers' time, after certain hours, is wholly at their own disposal. In the case of male attendants, the somewhat similar prison service proves more attractive than asylum employment, on account of the pensions to which prison warders become entitled after long service.

It should further be borne in mind that these figures include many persons who are not engaged in the special duty of attending on the insane, such as artisans of all kinds, farm-workers, hall-maids, laundrymaids, &c.

We register the name of every attendant and servant dismissed from an asylum for misconduct, and when any name so registered reappears among the notices of engagement transmitted to us, we intimate the facts to the superintendent by whom the engagement has been made, with a view to his ascertaining whether the engaged person is identical with that dismissed. In this way it frequently happens that the fact of dismissal from another asylum, which has been concealed on re-engagement, is detected. When the fault concealed has been serious, dismissal for a second time follows, but when it has not been of a grave nature, and the person's character has otherwise been good, another chance is usually given. We have no doubt that attendants and servants dismissed from asylums would much more frequently engage in the service of other asylums if it were not generally known among them that the facts as to dismissal will be communicated by the Board to any asylum in Scotland in which they re-engage.

Escapes from Establishments.

Ecapes from Establishments.

The whole number of escapes during 1904 was 171. Of these, 74 were brought back within twenty-four hours, 57 within a week, and 14 after a week. There were 26 still absent on the expiry of twenty-eight days from the date of escape. Of the 26 patients not brought back, 3 were removed from the asylum registers as recovered, 9 as relieved, 11 as not improved, and 3 died.

The following statement shows the number of escapes that have taken place during each of the ten years from 1895 to 1904:—

Statistics of Lunacy for 1904.

Escapes from Establishments.

Years.	Number of Escapes.	Not brought Back.		Number of Escapes per 1000 of Patients in Establishments.
		Removed from Register as Unrecovered.	Removed from Register as Recovered.	
1895, . . .	196	21	...	18
1896, . . .	180	17	2	16
1897, . . .	177	17	3	15
1898, . . .	217	33	2	18
1899, . . .	186	19	...	12
1900, . . .	190	27	3	15
1901, . . .	190	26	2	15
1902, . . .	181	20	2	14
1903, . . .	168	13	5	12
1904, . . .	171	20	3	12
Totals, .	1,856	213	22	...

It appears from this statement that the number of escapes during 1904 per 1000 patients was lower than the average shown during the last ten years. Very few of the patients not brought back before the expiry of the twenty-eight days during which the law permits of their being received into the asylum without new certificates and new Sheriff's order are permanently lost sight of, and many are ultimately replaced in asylums. Those discharged recovered were as a rule convalescent patients whose discharge was in contemplation at the time of escape.

Accidents in Establishments.

Accidents in Establishments.

The whole number of accidents reported to us as having taken place during the year 1904 was 151. Of these, 14 ended fatally, death in 11 of these cases being apparently due to suicidal impulse.

Of the deaths by suicide, 2 were caused by escape and drowning, 2 by hanging in lavatories, 1 by strangulation in a single room, 3 by escape and being run over by a railway train, 1 by drinking carbolacene, 1 by swallowing floor-polish, and 1 (a voluntary patient) by cutting the throat. In two or three of these cases suicidal intention was inferred rather from the patients' known tendencies than from the nature of the occurrence itself. There were 7 cases of attempted suicide. Of the 3 cases of fatal accident, 1 occurred through the patient getting in front of a train with the apparent intention of entering it from the platform side, 1 through a tube having been passed into the trachea during administration of medicine, and 1 through accidental scalding while the patient was being bathed.

In 46 further cases the accidents involved fracture of bones or dislocation of joints, and in 52 cases injuries to the head. These were occasioned in 48 cases by falls, and in 38 cases by struggling with fellow-patients or attendants, or by assaults of fellow-patients, while in 10 cases the fractures were intentionally or unintentionally self-inflicted, 1 was caused by a fall of plaster, and in 1 case the cause was unascertained. There were reported in addition 32

Statistics of Lunacy for 1904.

accidental wounds, contusions, doubtful fractures, &c., of which 8 were more or less serious, and the remainder of a slight character.

In every case of death by accident, of sudden or unexpected death, or death under circumstances of apparent or alleged suspicion, occurring in an asylum, the Superintendent is required to give immediate intimation not only to the Board, but also to the Procurator-Fiscal of the county in which the asylum is situated, who makes such inquiry as he may deem necessary.

Progressive History of Patients first admitted in 1898.

Progressive History of Patients first Admitted into Establishments in the year 1898.

On page xxxi of our Fourteenth Annual Report will be found a Table showing the changes which occurred among 1297 patients admitted to asylums for the first time in 1858 during that year, and the eleven subsequent years ending 1869. The results of that enquiry are further discussed on page xxxv of our Sixteenth Report. A similar series of Tables was begun in our Eleventh Report, relating to 1326 (subsequently corrected to 1319) patients admitted for the first time in 1868. The thirtieth and last of these Tables was given in our Fortieth Report, with a discussion of the inferences which may be drawn from the results.

The following is the sixth of a third series of such Tables dealing with the progressive history of 2539 patients admitted to asylums for the first time in 1898:—

Year.	New Cases Admitted.	Progressive History of Patients first admitted into Asylums in 1898.							
		Re-admitted during Year.				Removed Recovered.	Removed Unrecovered.	Died.	Remaining at 31st December
		Once.	Twice.	Thrice.	Total Number of Re-admissions.				
1898	2,539	71	3	...	77	678	135	247	1,556
1899	...	128	2	...	132	390	123	160	1,015
1900	...	93	9	...	111	93	45	113	875
1901	...	79	1	...	81	51	30	56	819
1902	...	50	3	...	56	52	24	53	746
1903	...	55	...	..	55	43	22	41	695
1904	...	43	1	...	45	29	17	35	659

It will be observed from this Table that at the close of the second year 209 re-admissions had occurred, and at the close of the seventh year the re-admissions numbered 557. Of these, 519 had been re-admitted once during the six years, and 19 twice (the latter number counting as 38 re-admissions). The total number of re-admissions during the six years is equal to 21·9 per cent. of the original number admitted. Calculated on the original number admitted, the recoveries during the first two years amounted to 42·1 per cent., discharges unrecovered 10·2, and deaths 16 per

cent., the removals from all causes thus representing 68·3 per cent. during the first two years of the original number admitted. During the last two years the removals from all causes amounted only to 7·4 per cent. of the original admissions.

Calculated on the mean number resident (the mean for the first year being taken at half the number resident at 31st December), the recoveries during the first year amounted to 87·1 per cent., and the deaths to 31·7 per cent. In the seventh year these percentages had fallen respectively to 4·3 and 5·2.

II. PRESENT CONDITION OF ESTABLISHMENTS FOR THE INSANE.

Present Condition of Establishments.

Different Classes of Establishments.

Establishments for the insane in Scotland arrange themselves in the followings groups :—(*a*) Royal and District Asylums, (*b*) Private Asylums, (*c*) Parochial Asylums, (*d*) Lunatic Wards of Poorhouses, (*e*) Training Schools for Imbecile Children, and (*f*) the Department for Criminal or State Patients in the General Prison.

The Royal or Chartered Asylums are institutions which were in existence previous to the enactment of the Lunacy Act of 1857. They are 7 in number. Five of these—the Royal Asylums of Aberdeen, Dundee, Edinburgh, Glasgow, and Montrose—were at their origin erected out of funds derived from legacies, subscriptions, and donations, including in all cases contributions of greater or less amount from parochial sources. The other two institutions, the Crichton Royal Institution at Dumfries, and Murray's Royal Asylum at Perth, were erected out of funds provided by the benefactors whose names they bear. All the 7 Royal Asylums received both pauper and private patients at the time of the passing of the Act of 1857; but the Directors of Murray's Royal Asylum resolved, soon after the passing of that Act, to devote the institution solely to the care and treatment of private patients, and the Glasgow and Dundee Royal Asylums now also receive private patients only.

District Asylums are institutions created under the provisions of the Lunacy Act of 1857. Asylums of this class are provided out of funds furnished by county and burgh assessments, and are intended for the accommodation of the pauper lunatics of localities where such accommodation is not otherwise provided. At present there are 19 such asylums in occupation.

Private Asylums are establishments conducted by their proprietors for profit; and only private patients are received into them. There are 3 such establishments at present.

Parochial Asylums are establishments erected out of funds furnished by the poor-rate of the parishes to which they belong. These establishments are called Parochial Asylums for convenience, but they are technically lunatic wards of poorhouses which have been licensed by the Board to receive pauper patients suffering from all forms of insanity, that is, those who are curable and dangerous as well as those who are regarded as incurable and harmless. There are 3 establishments of this class at present.

Present Condition of Establishments.

The name of Lunatic Wards of Poorhouses is given specially to portions of poorhouses which have been set apart for the accommodation of pauper lunatics who are regarded as incurable and not dangerous. Such sections exist at present in 12 poorhouses.

Different Classes of Establishments.

The National Institution for the Training of Imbecile Children at Larbert, and the Baldovan Asylum for Imbecile Children, are both charitable institutions erected by voluntary subscription. In addition to children received gratuitously, both receive private and pauper children whose board is paid respectively by their friends and their parishes.

The lunatic department of the General Prison at Perth provides accommodation for insane prisoners and convicts, and also for persons detained during His Majesty's pleasure, who have either been acquitted on account of insanity of the offences with which they had been charged, or have been found to be insane in bar of trial.

The Reports by the Commissioners of their inspection of the different establishments are given in Appendix B. These Reports are entered in the books of the respective establishments on the occasion of the statutory visits of the Medical Commissioners to the several institutions, and they form the basis of the following remarks:—

Royal and District Asylums.

(*a*) Royal and District Asylums.

Aberdeen Royal Asylum, Aberdeen.

The Aberdeen Royal Asylum has been materially relieved by the removal of 106 pauper patients to the new City Asylum at Kingseat and by the removal earlier in the year of 52 patients to the Lunatic Wards of the City Poorhouses. As a result of these removals the Directors have been enabled to proceed with their long-delayed scheme of renovating the older portions of the main buildings of the asylum. A commencement has been made with the south-eastern section of the female side of that building. The plans show that, when completed, there will be on the ground floor of this block three large day-rooms, a dormitory, two bath-rooms and three lavatories. The first floor is to be wholly occupied by dormitories, and from it there are three staircases, so that exits in case of fire are liberally provided. A further extension of female nursing on the male side of the asylum has been introduced by opening a ward for the nursing of infirm and senile patients under the charge of female nurses. All the sick, recent, and acute male cases in the asylum (with the exception of those who are unfit for such treatment) are now under the immediate care of women. Precautions in the event of an outbreak of fire have been taken to what is considered an adequate extent; a fire station conveniently situated has been erected, telephonic communication has been erected between the asylum and the City Fire Station, and outside escape staircases from the dormitory floors of the main buildings have been provided. The administration of the asylum and the treatment of the patients are favourably referred to.

Aberdeen City District Asylum, Kingseat, New Machar, Aberdeen.

The Aberdeen City District Asylum was inspected by the General Board on the 11th May 1904, and was approved of and adopted as the asylum for the Aberdeen City District Lunacy

Present Condition of Establishments.

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Royal and District Asylums.

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Aberdeen City District Asylum, Kingseat, New Machar, Aberdeen.

Board. It was opened for the reception of patients on the 16th of the same month. The asylum is built on the segregate principle. The buildings consist of a central hospital, five villas for men, five villas for women, an administrative block with accommodation for male attendants on its upper floor, a nurses' home, laundry and power house, kitchen and stores, recreation hall, workshops, and mortuary. The hospital provides accommodation for 100 patients—50 men and 50 women. All new patients are admitted to the hospital, and the arrangements for the admission and examination of these patients are similar to those in use in other modern asylum hospitals in this country.

Of the ten villas, two are closed, *i.e.* the doors are kept locked constantly owing to the class of patient which occupies them. The other four villas have their doors unlocked during the day and are termed Colony Villas. Four villas, two for men and two for women, are at present unoccupied. The asylum has at the present time accommodation for 478 patients. Its various sections are reported to be suitably furnished. Under the Medical Officers the asylum is managed by a Matron and two Assistant Matrons, all of whom are trained hospital nurses. There is no head male attendant. The day staff consists of 26 nurses and 8 male attendants, and the night staff of 7 nurses and 3 male attendants. All the buildings are lighted by electricity. The buildings are connected with each other and with the central administrative block by telephone. The water supply is abundant and is collected in a storage tank with a capacity of 300,000 gallons. This reservoir is 100 feet above the asylum floor level, and the pressure is consequently sufficient for all purposes. The sewage is treated after the Exeter system, with all the latest improvements, and the effluent is stated to be clear and free from deposit.

The various details of construction and the arrangements of the asylum have been planned with great care and success.

Argyll and Bute District Asylum, Lochgilphead

The general health of the patients in the Argyll and Bute District Asylum was found good, and the lowness of the death-rate is a fact which is favourably noticed. It is pointed out that the average number of patients discharged unrecovered is lower than the average in other Scottish asylums, which is attributed to the long distances and the difficulties of transit from the asylum to most of the parishes forming the district. Recently, however, the discharge of suitable patients on long periods of probation has been extensively resorted to as a means of testing the suitability of such patients for residence in private dwellings. The changes among the male attendants have been numerous, and it is suggested that a larger proportion of married attendants and the employment of female nurses for the care of the quieter and more infirm class of male patient might overcome the evident difficulty of procuring a suitable class of young male attendant in an asylum so remote from a large centre of population as this one is. The work of enlarging the present water reservoir to double its former capacity has now been completed, and there is therefore no reason to fear that the water supply will be deficient in the future. The price paid for gas for lighting the institution is stated to be very

Present Condition of Establishments.

Royal and District Asylums.

high, and there is consequently an undue economy practised in lighting the institution at night. It is therefore again suggested that the District Board should reconsider the advisability of introducing electricity as an illuminant, as is done in the great majority of Scottish asylums. The asylum is reported to be kept in excellent order and to be conscientiously managed by Dr. Cameron.

Ayr District Asylum, Ayr.

The wards for infirm and acute patients in the Ayr District Asylum are reported to be overcrowded; but it is, at the same time, recorded that estimates have been received for the erection of a new hospital for this class of patient, and that the work of building will commence without unnecessary delay. In connection with the building of the hospital, a branch line or siding from the neighbouring line of the Glasgow and South-Western Railway to the asylum is being constructed for the purpose of facilitating the conveyance of building materials. This line will be permanently continued, and will prove of use in the conveyance of coal and other heavy goods to the institution. Every necessary precaution in case of an outbreak of fire in the asylum has been provided for. A fire brigade has been organised and is regularly drilled, alternative exits have been provided from every part of the buildings where they were considered necessary, and a system of electric bells which sound an alarm and indicate the position of an occurring fire have been introduced. Among many other improvements and alterations, due to Dr. Easterbrook's initiative, may be mentioned the provision of mess-rooms for nurses and attendants and the appointment of an Assistant Steward and Assistant Matron. The patients are reported to have been tranquil and contented during the visits of the Commissioners. Their clothing and diet are favourably commented upon, but it is suggested that the substitution of chairs for the present benches would greatly facilitate the serving of the food and conduce towards better order and comfort in the dining-room.

Banff District Asylum, Ladysbridge.

An outbreak of smallpox occurred in the Banff District Asylum early in January 1904. There were in all five cases, limited to the male side of the asylum. Two male attendants and three male patients were attacked. The epidemic was promptly and vigorously dealt with from the outset both by the asylum and the county officials, and every precaution was imposed with the object of rendering isolation as effective as possible. The cases were fortunately, of a mild type and they all recovered satisfactorily.

It is recorded with disappointment that enteric fever has again made its appearance in the asylum. It is suggested that the water supply should be again examined, and the soil in the neighbourhood of the institution should be examined bacteriologically. The purity of the milk supply has been secured by the erection of a new dairy, furnished with all the necessary appliances for disinfecting the utensils by means of steam and hot-water pipes, and a milk store constructed on the most approved sanitary principles. The dormitories in the main buildings are reported to have been thoroughly cleaned and repainted, and their floors have been stained and varnished. These rooms have also been heated by steam, which

has greatly increased their comfort. The industrial employment of the patients is favourably commented on, and especially the work on the farm, which is almost wholly done by the male inmates. The farm is reported to be excellently managed and to be a source of profit and of an excellent food supply to the asylum.

Present Condition of Establishments.

Royal and District Asylums.

The two new buildings forming the hospital section of the division for pauper patients at the Crichton Royal Institution have been occupied by patients. They are described as admirable additions to the asylum. The male hospital contained 21 patients. It is under the charge of a Lady Superintendent, and the sick ward proper is entirely staffed by female nurses. The female hospital contained 31 patients. It is under the charge of a lady who is also one of the Assistant Medical Officers of the institution. These hospitals are comfortably and elegantly furnished, and they are described as being replete with all modern accessories and appliances for the treatment and nursing of the sick insane. The institution is steadily increasing its accommodation, chiefly by the gradual acquirement of separate houses. In the year 1900, apart from the First and Second House, which constitute the main asylum, there were 8 separate or detached buildings inhabited by 145 patients, or about 20 per cent. of the whole population. In 1904 there are 13 detached houses containing in all 291 patients, or 40 per cent. of the population of the asylum. This method is highly commended, and is regarded as establishing an individuality of treatment which could not otherwise be obtained within a lunatic asylum.

Crichton Royal Institution, Dumfries.

Among the accidents recorded in the entries is a fracture of the humerus sustained by a patient during a struggle with an attendant. An enquiry into the circumstances of this casualty was made by the Procurator-Fiscal, who decided that there were no grounds for instituting proceedings against the attendant. The contributions from the Crichton Fund towards supplementing the boards of poorer private patients is stated to amount to nearly £1700 a year. It is suggested that, owing to the contributions from this fund given to the insane in poor circumstances, the pauper lunacy of the southern counties is materially diminished, for persons who would otherwise necessarily apply to the parishes for relief are, owing to this provision, enabled to enter the asylum as private patients. It is reported that, owing to the extension of the villa system and to the opening of the new hospitals, there is a material reduction in the numbers resident in the Second House.

The Dundee Royal Asylum, which recently passed by purchase into the hands of the Dundee District Lunacy Board, continues to accommodate private patients, for whose care and treatment the Directors of the Royal Asylum continue to be responsible. The asylum for purposes of management and administration is, by arrangement, under the immediate charge of the District Board and their Medical Officers. When the institution was last visited there were about 70 patients in residence. The condition of the inmates and their surroundings are favourably commented upon.

Dundee Royal Asylum, Dundee.

Present Condition of Establishments.

Royal and District Asylums.

Dundee District Asylum, Dundee.

Reference is made to the retirement of Dr. Rorie from the post of Medical Superintendent of the Dundee District Asylum and to the appointment of Dr. Tuach Mackenzie to succeed him. The death of a male patient as the result of injuries to the chest involving numerous fractures of the ribs is recorded. The circumstances attending this patient's death formed the subject of exhaustive enquiries by the District Board, the Procurator-Fiscal, and the General Board. Although grave suspicions were entertained as to the culpable conduct of some of those in immediate charge of the patient, the evidence was not clear enough to justify any definite charge being made against any individual. At the time of the second visit the steam boiler was under repair, and consequently there was no steam for cooking, laundry work, or electric lighting. The inconvenience of not having a second boiler to fall back upon in case of emergency is pointed out. It is urged that a larger number of male patients ought to be employed in outdoor work upon the farm. Many and important alterations and improvements are engaging the attention of the District Board and the Medical Superintendent. Among these are the renovation of the kitchen and laundry, the enlargement of the sick-rooms, an improvement in the nursing arrangements, and the provision of better accommodation for nurses.

Royal Edinburgh Asylum, Edinburgh.

The accommodation for pauper patients in the Edinburgh Royal Asylum has been materially relieved by the transference of 137 patients to the Edinburgh District Asylum at Bangour. Owing to this the asylum has been able to admit 35 patients paying intermediate and lower rates of board. This function of the institution, which was necessarily in abeyance for many years, is one of such importance to certain classes of the community that its resumption is recorded with pleasure. The hope is expressed that in the future, when the City Parish patients have been removed, the Directors of this asylum may be able not only to accommodate patients at the lower rates of board, but that they may see their way to receive acute and recent cases of mental disease at the lowest possible rates, so that many people may be spared the necessity of applying to the parish for the relief of relatives suddenly or, for the first time, overtaken with mental derangement. The diversity of the accommodation for patients paying the higher rates of board at Craig House is again favourably referred to. It is pointed out that this variety of provision greatly facilitates classification, and has the advantage of securing, as far as possible, the privilege of the ordinary amenities of life to those who are well enough to appreciate them and the necessary amount of care and nursing to those who require it. The night supervision of the patients has been greatly extended both at Craig House and at the West House. The administration of the institution is stated to be permeated by an excellent tone which is manifested in the lay as well as in the medical care of the patients. It was also observed in the demeanour of the patients, who, except in the wards for acute cases, showed comparatively little excitement and who presented a remarkable freedom from constraint and an admirable readiness to express openly any grievance or complaint which they

considered important or necessary. These and other signs of contentment point unmistakably to a feeling of confidence on the part of the patients in the administration of the asylum.

Present Condition of Establishments.

Royal and District Asylums.

Edinburgh District Asylum, Bangour.

So little progress had been made with the erection of the new Edinburgh District Asylum at Bangour that it was found necessary to provide five houses or villas constructed of wood and iron to meet the urgent need of the district for accommodation. These villas were completed and made ready for occupation in May of last year. In the same month they were inspected by the General Board and were approved of as an asylum for the Edinburgh Lunacy District. Patients were received into these villas in the month of June, and up to the 20th October 1904, 90 men and 92 women had been admitted. These villas have been erected on the western part of the asylum site and they are ultimately intended as homes for working male patients. Internally they are suitably designed and they are constructed of non-inflammable materials. One of the villas has, by the erection of temporary partitions, been converted into an administrative block and affords on the ground floor accommodation for the Medical Superintendent and the Matron, and on the upper floor for 12 nurses. A portion of this house is set apart as store-rooms for the asylum. The other four villas are utilised solely for the accommodation of patients. Each of these villas is reported to be comfortably and suitably furnished and to contain all the necessary requirements for the care of the class of patients who reside in them. There is stated to be 1 attendant on day duty to about 9 patients and 1 on night duty to about 36 patients. The Matron has charge both of the male and female patients, and it is recorded with approval that one of the male villas is wholly staffed with female nurses. The organisation and administration of the establishment is referred to in terms of commendation.

Elgin District Asylum, Elgin.

The number of patients resident in the Elgin District Asylum shows little tendency to increase. There are several vacant beds in the asylum, notwithstanding that a few patients from Orkney are resident as boarders. The new water storage of the institution is now abundant, and the artificial pressure which can be got from the small engine in the boiler-house is regarded as sufficient to cope with any outbreak of fire that may occur. Plans for providing alternative exits from the dormitories in case of fire have been adopted by the District Board. These plans show an iron balcony running along the west wall of the female side, connecting the two wing dormitories with one another; on the male side an iron staircase descends to the roof of a proposed new lavatory and bathroom. This new lavatory is much required, and will, it is predicted, form a very useful addition to the male division of the asylum. The condition of the patients was satisfactory, and stress is laid upon the excellent order and scrupulous cleanliness with which the asylum is kept.

Fife and Kinross District Asylum, Cupar.

It is said to be owing to Dr. Turnbull's constant and successful efforts in removing quiet and harmless patients to private care that the population of the Fife District Asylum is not greater than it is.

Present Condition of Establishments.

Royal and District Asylums.

There is reported to be, notwithstanding, overcrowding on the male side of the asylum, and on the female side there were in November only six vacant beds. In these circumstances, it is recorded with satisfaction that the new wings of the hospital block, capable of containing 50 patients each, are now so far advanced that they will be ready for occupation early this year. A case of suicide by drowning is reported. The patient, a man, had so far recovered from an attack of melancholia that he was sent to reside in the convalescent villa, from which he wandered away and threw himself into the river Eden in the vicinity of the asylum. A fracture of a rib in a male patient was attributed to an assault committed upon the patient by an attendant. The matter was investigated by the Procurator-Fiscal, and although no evidence justifying criminal proceedings was elicited, the attendant was dismissed. The present laundry is described as antiquated and its machinery as obsolete and inadequate for the amount of work required in a large asylum. It is recommended that it should be enlarged and fitted with new machinery. Telephonic communication has been established between the principal sections of the asylum and to the Medical Superintendent's house. It is understood that alternative means of exit from the upper dormitory floors of the hospital are to be established by erecting balcony bridges between the present dormitory floors and the corresponding floors in the new wings of the hospital.

Glasgow Royal Asylum, Gartnavel, Glasgow.

The introduction of female nurses into the sick-rooms of the gentlemen's division of the Glasgow Royal Asylum is referred to with approval and is said to increase the hospital character of the asylum. Two wards in the East House are being fitted up as sick-rooms for male patients, and it is intended to staff them with female nurses. The low death-rate in this asylum again attracts favourable notice. A death from suicide is reported. The patient (a man) was under strict supervision for the purpose of preventing the fulfilment of his suicidal intention. He succeeded, however, on one occasion to elude the vigilance of his special attendant for just so long as to enable him to take his own life by hanging. A new church situated within the asylum grounds has recently been opened for service. Internally the arrangements are said to be artistic and to correspond to the modern system of church architecture, with Communion table, pulpit, and lectern. The church is seated for 300 people, and the fittings are said to be comfortable and in excellent taste. A distinctive feature of the treatment of certain classes of the patients is placing them in bed in the open air under the shelter of a verandah. This is understood to form a useful and successful addition to the ordinary bed treatment of acute cases, which is extensively carried out in this asylum with excellent results. There are reported to be in the asylum at present no less than 50 patients whose rate of board is under £40 per annum, and it is understood that admission is never refused to hopeful patients in straitened circumstances who cannot pay the lowest nominal rate.

Present Condition of Establishments.

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Royal and District Asylums.

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Glasgow District Asylum, Gartloch, near Glasgow.

Among many improvements recently carried out at the Glasgow District Asylum at Gartloch are mentioned the widening of the verandahs in the Hospital Block so as to allow beds to be placed in them for the open-air bed treatment of acute cases of mental disease. The laundry has been enlarged and extended, and a new dispatch-room and clothes store have been added to it. Septic tanks for the purification of the sewage from the Sanatorium and farm colony villa have been constructed. A new wing, consisting of 26 bedrooms, is being added to the Nurses' Home. By a reconstruction of the interior of the building, and the removal of a number of single rooms, two new reception-rooms, the one for men and the other for women, have been formed. These reception-rooms are exclusively for the bed treatment of recent and acute patients and give accommodation for 18 patients of each sex—in all, 36 beds. The male reception ward is under the charge of male attendants. With this exception, and that of the observation ward for troublesome male patients not confined to bed, the whole of the hospital division is under the charge of female nurses. The new villa for the accommodation of male patients engaged in farm work is said to be in every respect suited for its purpose, to be comfortably furnished, and well heated and well lighted. The death of a female patient through suffocation in the hot-air flue in the laundry is recorded. With the intention of escaping she hid herself there and was not missed until it was too late to save her. One of the laundresses sustained a severe compound fracture of the bones of the forearm, necessitating amputation of the limb, through attempting to arrange clothes in a wringing machine while it was in motion.

Glasgow District Asylum Woodilee, Lenzie.

It is reported that the Reception House at the Glasgow District Asylum, Woodilee, had become too small for the requirements of the asylum, and that the Sanatorium for phthisical patients, which contains 60 beds (30 for each sex), is now used with advantage as the admission hospital of the asylum. This arrangement permits of a better classification of the new cases, and allows the recently-admitted cases to remain longer in the Reception House than when the smaller building was used for that purpose. The arrangements for reception, nursing, and medical treatment of cases newly-admitted into this asylum are said to be probably unsurpassed by that of any institution in the kingdom. A fatal occurrence in the case of a boy, an inmate of the villa for idiots and imbeciles attached to the institution, is recorded. The injuries, which resulted in death, were received while the patient was being bathed, and consisted in severe scalding caused, it is believed, through neglect to test the temperature of the bath water. Another fatal accident resulted from swallowing a substance known as carbolacene, used for various cleansing purposes. The subject of this accident was a female patient, who seized and drank a quantity of the substance while the nurse who was using it had her attention temporarily distracted. A male patient, while assisting in drawing a railway waggon into the boiler-house, slipped and fell, and the wheels of the waggon passed over one of his feet necessitating

Present Condition of Establishments.

Royal and District Asylums.

amputation of the limb. The new Nurses' Home, capable of accommodating 110 persons, is reported to be ready for occupation. The new pathological laboratory is now in use. It is large, well constructed, and very liberally supplied with every appliance of a modern description for clinical research in nervous disease, and for the investigation of pathological details. It contains a waiting-room, a *post mortem* room, with cold chamber, and adjacent microscopic and section-cutting rooms, a chemical room, a lecture room or library, and smaller rooms for private research. It is stated to be perhaps the most complete and best equipped institution for nervous pathology in the United Kingdom.

Govan District Asylum, Hawkhead, Paisley.

An assault committed by an attendant upon a patient in the Govan District Asylum is recorded. The case was reported to the Procurator-Fiscal, and the attendant was tried, found guilty, and fined £5, with the alternative of 21 days' imprisonment. The asylum provides accommodation for 540 patients—287 men and 253 women. The male side of the asylum is full, but there are about 30 beds vacant on the female side. The reconstruction of the farm cottages will, it is expected, provide room for about 20 men, but it is evident that an extension of the asylum accommodation will shortly be required. The question of the form which such an extension should take is discussed, and it is pointed out that as the hospital is full provision of some kind must be made for sick and infirm patients either by erecting special accommodation or by erecting villas for quiet, industrious patients, and utilising the room thus set free for the accommodation of the weaker patients requiring nursing. The dietary of the inmates, more especially the dinners and the service of the food, are all features which receive favourable comments in the reports. The asylum accommodation has just been extended by opening wards for male patients in the workshop block. This accommodation consists of a large dayroom and two dormitories capable of housing 32 male patients. The dormitories have a small cubic area owing to the fact that the ceilings are much sloped, but an improvement is expected by the introduction of efficient ventilators in the roof.

Haddington District Asylum, Haddington.

The Haddington District Asylum is stated to be maintained in good order and to be scrupulously clean throughout. The institution is, however, reported to be overcrowded, and additional beds have had to be placed in the female dormitories. There are reported to be 14 men and 9 women resident above the dayroom accommodation, and 3 men and 4 women in excess of the sleeping accommodation. It is feared that this accumulation may go on unimpeded unless some steps are taken to remove the patients who do not require asylum care to private dwellings. A circular was addressed to the Clerks of the Parish Councils in the county by the District Board requesting that each parish should remove from the asylum those patients chargeable to it who were deemed suitable for boarding out. It is regretted that in regard to the majority of Parish Councils there is an entire lack of interest or co-operation in this matter, and it is therefore feared that the prospect of

the removal of incurable but inoffensive patients is very small. In these circumstances, an extension of the asylum buildings is imperative. It is recommended that such extension should be in the form of detached villas. The introduction of a baking oven into the asylum is strongly recommended in order to vary the monotony of the dietary by making it possible to cook by roasting instead of by boiling exclusively, as at present.

Present Condition of Establishments.

Royal and District Asylums.

During the last four years no less than 159 patients who, though not recovered, were yet sufficiently quiet to live in private dwellings have been discharged from the Inverness District Asylum. This fact forms the basis of commendatory reference, and it is pointed out that in a Scottish asylum the interests of the ratepayers and of the patients themselves demand that such patients should be discharged. It is regretted that some of the parishes in the district do not co-operate in this movement, which is essential for the prevention of undue asylum extension. A patient newly admitted in a state of acute excitement was brought into the bathroom in charge of an attendant where another attendant was preparing the bath by filling it with hot water. The patient (a male) broke away from the attendant and jumped into the bath, placing his head under the tap of hot water. His injuries were so severe that he died in the course of a few days. The matter was reported to the Procurator-Fiscal, who did not judge, after investigation, that there was ground for accusing the attendants of negligence. Plans for the conversion of various outhouses in connection with the mansion-house of Kinmylies into accommodation for patients have been prepared. This mansion-house, which has been recently acquired by the District Board, contains 25 working patients whose condition is said to be in all respects satisfactory. Reference is made to the resignation of Dr. Keay on his appointment to the post of Medical Superintendent of the new Edinburgh District Asylum at Bangor. It is stated that under Dr. Keay's management the Inverness Asylum has been made efficient in respect of all those modern requirements which are essentially medical and curative, and that it has been brought into line with the best similar institutions throughout the country. Dr. Campbell, Senior Assistant Medical Officer in the Crichton Royal Institution, has been appointed to succeed Dr. Keay.

Inverness District Asylum, Inverness.

The accommodation for the staff at the Kirklands Asylum, Bothwell, is the subject of commendatory remarks in the Medical Commissioners' reports. There are eight well-designed cottages for married attendants and artisans, a nurses' home consisting of 14 bedrooms and a large sitting-room, and a home for 8 male attendants to which is attached the house of the Head Male Attendant, who, with his wife, act as caretakers of the home. A detached home for male attendants is a novelty in connection with Scottish asylums, and it is therefore recorded with pleasure that none of the drawbacks which it was feared would attend it have appeared after 10 months' trial. It is reported that plans have been prepared with the object of structurally improving the wards for male patients. The changes contemplated

Kirklands Asylum, Bothwell.

Present Condition of Establishments.

Royal and District Asylums.

include the provision of new bootrooms, lavatories, and bathrooms, additional dayroom accommodation, and the brightening of some of the dayrooms by the introduction of large windows. An alternative exit by means of a fire-escape staircase is also to be provided. The quality of the food and the service of the midday meal attracted favourable attention. In comparison to the number resident, the admissions into the asylum are very numerous, and nothing but the vigilant attention of Dr. Skeen to the discharge of unrecovered patients prevents the institution from becoming overcrowded.

Lanark District Asylum, Hartwood, Shotts.

Out of 816 pauper patients resident in the Lanark District Asylum, 658 are chargeable to parishes in the county, 68 to Edinburgh, 80 to parishes in Renfrewshire, and 10 to other districts. The patients chargeable to the district are increasing at the rate of about 10 a year. Fifty-eight per cent. of the male patients are reported to be regularly employed in outdoor work upon the farm and grounds; this is stated to be the second highest proportion of male patients so employed in any asylum in Scotland. During the year about 250 acres of bog land have been drained. The new recreation field, extending to about 5 acres, has been drained and levelled. It is reported that important changes in the nursing of newly admitted patients have been introduced. A new ward for the reception and bed treatment of acute and recent cases has been opened in the female hospital. This ward, which contains 18 beds, is supplementary to an adjoining ward of 20 beds, so that the possible accommodation for acute and recent female cases now extends to 38 beds. For the corresponding class of patients on the male side the nursing arrangements are equally extensive and satisfactory. It is understood with approval that the District Board have resolved to erect a hospital for the treatment of consumptive patients which will contain 40 beds—20 for each sex. The food and its service is the subject of laudatory references. It is considered worthy of notice that the tea for the "family" tables in the dining-hall is infused in separate teapots for each table (18 in number.) The difference in the flavour of the tea thus infused is so remarkable, and its appreciation by the patients so evident, that a hope is expressed that all the inmates may in time be supplied with tea prepared in this way.

Midlothian and Peebles District Asylum, Rosewell, Roslin.

It is pointed out that the pauper patients in the Midlothian and Peebles District Asylum are increasing rapidly, and it is therefore recorded with satisfaction that efforts are being made to remove to care in private dwellings those patients who are quiet and harmless and who do not require detention in an asylum. A list of 32 such patients has been prepared by Dr. Mitchell, and the Parish Councils to whom these patients are chargeable have been asked to find suitable homes for them. In the meantime, several patients have been discharged on probation with a view to testing their suitability for living outside the asylum The death of a patient through having been run over by a railway train is recorded. The patient was at the time in charge of an attendant on the platform of a railway station in the neigh-

bourhood of the asylum and crossed the line in front of an approaching train, but whether with suicidal intent or not it is difficult to determine. A male patient is reported to have received several bruises as the result of an assault made upon him by an attendant. The attendant absconded before the Procurator-Fiscal's investigation took place. It is understood that telephonic communication is to be established between the asylum and the caretaker's house at the reservoir; it is recommended that similar communication should be established between the hospital wards, the farm buildings, and the engine-house. It is learned that the pressure of water to the asylum is interfered with by a water meter placed midway between the asylum and the reservoir. It is recommended that this meter should be placed at the asylum near the engine-house.

Present Condition of Establishments.

Royal and District Asylums.

It is pointed out that the discharge of unrecovered pauper patients from the Montrose Royal Asylum is too small, and that the percentage of such discharges is only one-half of the Scottish average. It is further pointed out that the judicious discharge of such patients is desirable, as it prevents undue accumulation in the asylum, and relieves the ratepayer of a burden he ought not to be called upon to bear. An important advance in the nursing arrangements of the asylum has been made by the introduction of female nurses into the male hospital. It is also recorded with approval, that recently-admitted cases are now treated in the hospital, where a ward has been set apart for that purpose. Extensive alterations have been made in the water pipes around the asylum buildings with the object of increasing the water supply; the hydrants around the buildings have been doubled; a force pump has been provided to increase the pressure of water; and a syren has been placed in connection with the boilers. Two outside staircases have been erected at each extremity of the main buildings, and several other subsidiary but necessary changes have been made with the object of protecting the institution in the event of an outbreak of fire. It is reported that a female patient recovering from an attack of melancholia escaped from the laundry, where she was working, and was killed on the railway line some distance from the asylum.

Montrose Royal Asylum, Montrose.

Two new villas at the Perth Royal Asylum have been completed and are now occupied—the one by ladies and the other by gentlemen. They have been erected at the moderate cost of £2000 each. They are favourably reported upon, and are said to have been fitted and furnished in a style befitting the class of patient for whom they are built. A new chapel, situated between the two villas referred to, was opened on the 29th September. This chapel was built almost entirely by subscription, and it is recorded with interest that fully one-third of the cost was contributed by former patients or their friends. The principal stained-glass window and the Communion table are the gifts respectively of Mrs. Haultain and Miss Malcolm, daughters of former physicians to the institution. A new dining-room and a new recreation-hall have been formed by structurally altering certain portions of the buildings, and the

Murray's Royal Asylum, Perth.

Present Condition of Establishments.

Royal and District Asylums.

results are said to be highly satisfactory, both from an administrative and an artistic point of view. In the recreation-hall there is a large permanent stage for concerts and theatrical entertainments. The construction of the stage with special reference to protection from the risk of fire is interesting and important. It is reported that each recovered patient who leaves the asylum takes with him a letter of enquiry as to treatment and a request for suggestions as to the improvement of the care of the inmates.

Perth District Asylum, Murthly.

The new villa for female patients at the Perth District Asylum is said to be making satisfactory progress towards completion. It has been found possible, at a moderate cost, to add an attic flat to this villa, which will provide suitable bedroom and sitting-room accommodation for some of the female staff. The numerical strength of the staff of attendants and nurses is regarded as being somewhat too low. There is 1 attendant to 11 patients, and 1 nurse to 12 patients. The boiler-house now contains three boilers, each of which can be worked up to 120 lbs. pressure. There is at present only a single plant for working the electric-lighting apparatus, but it is learned that the District Board have resolved to duplicate it and to supply the light directly from the dynamos without the use of storage. The removal of a number of trees and of underwood from the vicinity of the asylum and of the walks around it has greatly added to the brightness of the buildings and the dryness of the roads. The treatment of the new and acute cases by Dr. Bruce again forms the subject of laudatory comment. The majority of them are confined to bed during treatment, and the remedies used are not empirical but based upon the results of scientific researches which have for several years been successfully carried out at this asylum by Dr. Bruce and his assistants.

Roxburgh District Asylum, Melrose.

The Roxburgh District Asylum is reported to be much overcrowded. There are 24 patients on the male side and 23 on the female side in excess of the accommodation. The new male hospital, which ought to have relieved this state of matters, has not made the progress which was expected. It is recorded with satisfaction that the District Board has resolved to proceed with an extension of the female side capable of accommodating 60 patients. The addition will also contain accommodation for 12 nurses, a bathroom, and a sewing-room. In presence of the overcrowded condition referred to, the institution was seen to great disadvantage. The question of boarding out quiet, harmless unrecovered patients in private dwellings is discussed, but it is stated that the social conditions in the counties forming the district are not favourable to boarding out. On the other hand, it is pointed out that constant and successful efforts are made by Dr. Johnstone to keep down the accumulation of patients in the asylum by discharging on probation every patient who it is considered would be likely, without prejudice to other interests, to live successfully outside the asylum. No less than 127 persons, or 38 per cent. of the present population of the asylum, have at one time or another been previously under care in the asylum. Apart from the fact of there being an em-

barrassment of administration caused by the excessive number of patients, the conduct of the asylum by Dr. Johnstone is stated to be in every respect admirable, and the good relations existing between him and his patients are again referred to.

Present Condition of Establishments.

Royal and District Asylums.

Notwithstanding a high admission-rate, it is recorded that the number of patients resident in the Stirling District are not increasing unduly. This is attributed to the fact that the recovery and death-rates have both been high, and that constant attention is directed to the removal of all patients who for any reason do not require asylum care. During the last three years no less than 203 patients were discharged unrecovered, the greater number of whom were placed under family care. The large death-rate is accounted for by Dr. Robertson as being due to the large percentage of tuberculosis, to the increasing number of general paralytics admitted, and to the larger proportion of senile cases sent to the asylum. The large number of deaths from phthisis forms the basis of a recommendation that the District Board should, as soon as possible, erect a sanatorium for the isolation of patients suffering from that disease. A case of suicide is recorded; the patient (a man) was recovering from an attack of melancholia, and was able to assist the nurses in household work. In the pursuance of this work he was one morning incautiously allowed by one of the nurses to go outside. He seized the opportunity to go to the railway line, and his dead body was afterwards found mutilated by a passing train. Both the male and female divisions of the institution are now under the charge of one Lady Superintendent. Acting under her are six Assistant Matrons. It is considered that in this way the asylum is brought more into line with the methods which have been so well established in the management of general hospitals. It is understood with approval that the District Board have under consideration the advisability of erecting additional cottages for married attendants and a home for nurses. The comparatively small proportion of men engaged in outdoor work is pointed out, and it is strongly recommended that the District Board should acquire more land for agricultural purposes. The amount of arable land at present in possession of the District Board is much below the Scottish average.

Stirling District Asylum, Larbert.

(*b*) Private Asylums.

Private Asylums.

An improvement in the Mavisbank Asylum is reported to have been effected by the painting and decoration of the drawing-room and entrance corridor. The drawing-room has been partially refurnished and the floor covered with new rugs. It is understood with satisfaction that the renovation of the gentlemen's sickroom is to be undertaken soon. It is strongly recommended that lavatory and bathroom accommodation should at the same time be introduced into this division. The case record and the clinical work done in the establishment are referred to in favourable terms.

Mavisbank Private Asylum, Polton.

The numerous rooms occupied by patients in the Saughton Hall Asylum are described as being comfortably and, in many instances,

Saughton Hall Private Asylum, near Edinburgh.

Present Condition of Establishments.

Private Asylums.

sumptuously furnished. It is reported with approval that abundance of literature of every description was laid out in each room for the use of the patients. The contentment of the patients and the absence of complaints are recorded, and it is observed that a large amount of individual liberty is allowed to those patients who can be trusted not to abuse it. The records of the medical progress and history of the individual cases continue to be kept, it is stated, with care and minuteness.

Westermains Private Asylum, Kirkintilloch, Dumbartonshire.

The Westermains Asylum is said to be kept in excellent order The patients are reported upon favourably. They enjoy, it is stated, satisfactory bodily health, and their general wants are adequately attended to..

Parochial Asylums.

(*c*) Parochial Asylums.

Greenock Parochial Asylum, Greenock.

The register of Restraint and Seclusion in the Greenock Parochial Asylum contains a proportionately high number of entries. The reasons given for the use of restraint and seclusion are the violent and impulsive conduct of eight of the inmates. In this connection it is pointed out that the staff of attendants and nurses (1 attendant to 11 male patients and 1 nurse to 15 female patients) is probably too low for the class of excited patient the asylum appears to accommodate. It is pointed out that the number of *post mortem* examinations is too low, and that these examinations should be made in every case in which the consent of the relatives is not refused. It is stated that the hospital accommodation for new and acute cases is defective and ought to be increased. The work of reconstructing the laundry has been begun, and it is anticipated that the new laundry will fully meet the needs of the institution.

Paisley Parochial Asylum, Craw Road, Paisley.

The wards and dormitories in the Paisley Parochial Asylum, Craw Road, were found in a state of commendable good order. The new fire-escape staircase has been completed and affords an alternative exit from all parts of the building which require such provision. This staircase is built as a projection from the building and is completely covered in; the steps are broad and the ascent is easy; and a hand-rail has been provided for the use of frail patients. It is understood that the present lavatories at the end of the large male and female dormitories are to be removed and replaced by modern appliances. It is recommended that an additional female attendant should be engaged.

Paisley Parochial Asylum, Riccartsbar, Paisley.

It is stated that the percentage of patients discharged unrecovered from the Paisley Parochial Asylum, Riccartsbar, and boarded out either with relatives or strangers has been considerably higher than the average of all Scottish asylums. In the early months of the year three of the male attendants were attacked with enteric fever, but the epidemic did not extend beyond that number, and none of the patients were affected. The condition of the laundry, kitchen, and scullery are unfavourably reported upon. The lighting and ventilation of these departments are defective, and their internal arrangements and equipment are

stated to be inadequate. It is recommended that a new laundry should be built, and part of the present laundry building incorporated into the reconstructed kitchen. The treatment of the patients in the male and female hospitals of the asylum forms the subject of eulogistic remarks. It is observed that the importance of treating so many of the acute and newly-admitted cases in bed is fully recognised and practiced, and that the general nursing and treatment of these cases is attended with successful and encouraging results.

Present Condition of Establishments.

Parochial Asylums.

(*d*) Lunatic Wards of Poorhouses.

Lunatic Wards of Poorhouses.

As regards food, clothing, and general care, the patients in the lunatic wards of the Aberdeen East Poorhouse were found in a satisfactory condition. The various dayrooms and dormitories are reported to be clean, well-aired, and in good order.

Aberdeen East Poorhouse, Aberdeen.

The condition of the 56 patients in the Aberdeen West Poorhouse is favourably referred to, and there is said to have been no evidence of restlessness or discontent among the inmates.

Aberdeen West Poorhouse, Aberdeen.

There has been, it is stated, a satisfactory absence of ailments of a serious nature among the patients in the lunatic wards of the Buchan Poorhouse, and no death is recorded in the entries. The appearance of the inmates is said to indicate a good dietary, and their robust health is attributed to the large amount of time they pass in the open air. There is no casualty recorded, and no escape. The living-rooms and bedrooms are, it is stated, kept in excellent order and scrupulously clean.

Buchan Poorhouse, New Maud, Aberdeenshire.

Three accidents are recorded as having occurred in the Cunninghame Poorhouse lunatic wards. Two were of a minor description, but one involved a fracture of the right forearm. The occurrence was caused by slipping on a polished floor. It is said that the walls of many of the rooms are dingy and greatly in need of repainting. It is understood that estimates have been obtained for this work and that these apartments will shortly be renovated. The grounds around the institution are reported to be well kept, and the large garden supplies vegetables in liberal quantity for the use of the inmates.

Cunninghame Poorhouse, Irvine, Ayrshire.

The lunatic wards of the Dumbarton Poorhouse were found in every respect satisfactory. The living and sleeping rooms have been greatly improved by repainting, and the walls have been decorated with pleasing pictures, which relieves their former bareness. A satisfactory feature in the management is said to be the large number of patients industrially employed.

Dumbarton Poorhouse, Dumbarton.

A death from suicide is reported in the lunatic wards of the Dundee East Poorhouse. A male patient jumped through a dormitory window and died of the injuries thus sustained. He was not known to have had suicidal tendencies, and consequently no

Dundee East Poorhouse, Dundee.

Present Condition of Establishments.

Lunatic Wards of Poorhouses.

special precautions were adopted in his case. The regrettable occurrence is regarded as one of those incidents which are liable to take place from time to time wherever the insane are associated in numbers. The wards were found in good order, and have been recently improved by the repainting of the corridors and dormitories.

Dundee West Poorhouse, Dundee.

The patients in the lunatic wards of the Dundee West Poorhouse were, it is stated, found in a satisfactory state of health, and their wants are adequately supplied. The various rooms occupied by patients were in good order. It is understood that the Parish Council have resolved to discontinue the wards, as the accommodation is required for ordinary paupers.

Edinburgh Poorhouse, Craiglockhart.

The patients in the lunatic wards of the Edinburgh Poorhouse, Craiglockhart, notwithstanding their number and the fact that a certain proportion of them are acute cases, are said to have been remarkably quiet and orderly during the visits. Their general health was also satisfactory. The patients in the branch establishment at Middleton Hall were found in good health, suitably dressed, and properly fed. The high proportion of the inmates daily employed in useful work is referred to. Thirty-three men at Craiglockhart and 32 men at Middleton Hall are reported to be regularly engaged in healthy outdoor work in the gardens and grounds.

Govan Poorhouse, Govan, Glasgow.

The accommodation which the reconstructed lunatic wards of the Govan Poorhouse affords is said to be of an excellent character. The two main dayrooms are bright, cheerful, and spacious apartments, and it is believed that their comfortable and pleasant furnishings cannot fail to have a beneficial effect upon the conduct and mental health of the inmates. It it suggested that the laundry, which is much in need of renovation and repair, should next engage the attention of the Committee. In its present condition it is reported to be too small for the work now devolving upon it, and its arrangements are antiquated. The bodily health of the inmates is favourably referred to; they are stated to have presented a healthy, well-nourished appearance and to have looked as if they spent a sufficient portion of their time in the open air. The living and sleeping rooms were found in excellent order and scrupulously clean.

Inveresk Poorhouse, Inveresk.

It is reported that there is still a scarcity of water in the Inveresk Poorhouse, and that, in consequence, there is no prospect of immediately obtaining an additional water supply for the sculleries attached to the lunatic wards. When the new supply is obtained it is hoped that the Committee will consider the advisability of introducing hot water into the wards. The stairs leading to the wards have been provided with hand-rails, which are regarded as an improvement. The condition of the rooms and the care of the inmates are said to be satisfactory

Present Condition of Establishments.

Lunatic Wards of Poorhouses.

Kincardine Poorhouse, Stonehaven.

The lunatic wards of the Kincardine Poorhouse were found in good order and in a commenable state of cleanliness. The majority of the inmates are reported to be daily engaged in useful work which conduces to their physical and mental wellbeing. It is recommended that the straw palliasses in the beds, which are worn and musty, should be replaced by wire mattresses. There is a deficiency in the number of fire buckets which it is recommended should be at once attended to.

Linlithgow Poorhouse, Linlithgow.

There has been no casualty among the inmates of the Linlithgow Poorhouse lunatic wards; no patient escaped, and there was no change among the attendants. The patients are reported to be treated in a liberal and kindly manner, to be free from irksome discipline, and to enjoy a great amount of individual liberty and freedom. Various apartments forming these wards have been greatly improved in appearance by repainting. The living-rooms and sleeping-rooms were found scrupulously clean and in good order.

Old Monkland Poorhouse, Coatbridge.

All the dayrooms and dormitories in the lunatic wards of the Old Monkland Poorhouse have been repainted, and the apartments presented, in consequence, a bright and cheerful appearance. The floors of the living-rooms and of the dining-rooms on both sides have been covered with linoleum. Pictures of a suitable size have been hung on the walls of the dormitories, which add a furnished and decorative appearance to these rooms. These alterations are cordially commended not only as being beneficial in themselves but as showing a desire on the part of the Governor and Committee to maintain the already excellent state of these wards and the welfare of the inmates. The health of the patients, their dietary, and their clothing are all referred to in terms of praise.

Perth Poorhouse, Perth.

The lunatic wards of the Perth Poorhouse continue, it is stated, to be well managed, The dayrooms have been thoroughly renovated and present a bright and cheerful appearance. The personal clothing, the beds, and the feeding of the patients are reported to be satisfactory. For various reasons, chiefly on account of the position of the new laundry, the quarters formerly occupied by the men and women respectively have been transposed. An ingenious and seemingly effective method of extinguishing fire has been introduced by Mr. Laird, the Governor of the Poorhouse, and it is suggested that the method employed is worthy of extended trial in order to test its usefulness.

Wigtown Poorhouse, Stranraer.

The full manner in which the medical records in the Wigtown Poorhouse lunatic wards are kept by the Medical Officer is again referred to. Four of the male inmates of these wards are on parole beyond the grounds and do errands in the town and neighbourhood. All the patients are allowed to walk about the grounds at will, and none of the doors of the wards are locked during the daytime. The living and sleeping rooms of the patients were found clean, bright, well-aired, and generally in good order.

Present Condition of Establishments.

(*e*) Institutions for Imbecile Children.

Training Schools for Imbecile Children.

Baldovan Institution, Dundee.

An accident which might have had more serious consequences than it had is reported in the Baldovan Institution. One of the bigger girls, while assisting a nurse in housework, removed a fireguard in the temporary absence of the nurse, with the result that her clothes caught fire and she was severely burnt about the chest and neck. She made a good recovery, and her face is not disfigured. The children are said to look happy, and their general health was apparently good. It is recorded with satisfaction that the Directors find themselves in the fortunate financial position of being able to proceed with the erection of two villas and a covered playground in connection with their new buildings. This will do away with the necessity of maintaining the old house as a part of the institution and will in every way facilitate administration and supervision, and add to the comfort of the children. It is recorded with satisfaction that the rate of board has been raised from £25 to £28 a year. The latter sum, when the upkeep of the buildings, the amount of care and nursing required by the large number of helpless children, and the ordinary cost of maintenance and education are considered, will not be found too high a charge.

Larbert National Institution.

The numbers resident in the Larbert Institution have been decreased by the Directors, because there were more children resident than the institution could properly accommodate. The opinion is expressed that the Directors are right in limiting the numbers to the accommodation, but in view of the large number of imbecile children in Scotland who are unprovided for, and in view of the confidence shown by the general public in the institution which is expressed in the large and increasing number of private pupils sent from all parts of the country to the establishment, the hope is expressed that the Directors will speedily extend their useful work by enlarging the institution. A new hospital and sanatorium for children has been erected and was complete except for the furnishing. It is anticipated that it will prove a valuable adjunct to the usefulness of the institution. It is stated that it would be difficult to speak too highly of the systematic and painstaking instruction which is daily given in the schoolrooms. The results are naturally unequal, but by careful attention to the aptitudes of each pupil the general results are gratifying and surprising. Special methods of tuition are employed to overcome the slow mental grasp of new facts and of general knowledge by the majority of the pupils, and in most instances those methods are relatively successful. The neatness of the dress of the children, their cleanliness both by day and by night, and the excellence of their care are all referred to in the entries.

Establishment for State and Criminal Lunatics.

(*f*) Establishment for State and Criminal Lunatics.

Lunatic Department of H.M. General Prison at Perth.

The Lunatic Department of H.M. General Prison at Perth is maintained by the State for the confinement of those persons called criminal lunatics who are or who have been insane and who are still regarded as requiring detention in a prison.

During 1904, 9 patients were admitted to this establishment. The offences of which they were accused or were guilty, the places from which they were brought, and other facts regarding them are shown in the following statement:— Establishment for State and Criminal Lunatics.

H.M. General Prison, Perth—Admissions to Lunatic Department during 1904.

R/N. M.	R/N. F.	Whence brought.	Date of Trial.	Initials of Name.	Date of Admission.	Offence of which Accused is Convicted.
1	–	Penal Department, Perth,	3 Dec. 1903	D. M'K.	1904. 30 April	Theft by house-breaking and p.c.
2	–	London, ...	28 Jan. 1895	J. M'K.	9 June *	Assault by discharging loaded firearms and p.c. of assault.
3	–	Dundee, ...	30 Mar. 1891	P. F.	24 June*	Murder.
4	–	Glasgow Prison, . . .	5 July 1904	D. M'K.	12 July	Murder.
5	–	Peterhead Prison, . .	14 Oct. 1901	G. G.	3 August	Theft from hotels and p.c. of theft.
6	–	Edinburgh Prison, . .	20 July 1904	B. R.	12 August	Found with intent to steal.
7	–	Edinburgh Prison, . .	11 July 1904	A. P.	6 September	Fraud.
8	–	Peterhead Prison, . .	28 Feb. 1902	A. B.	18 October	(1) Assault and rape, (2) assaulting a man.
9	–	Glasgow Prison, . .	27 Dec. 1904	W. M.	31 December	Murder.

*Re-committed in breach of condition.

The subjoined figures show the changes among the inmates of the Department in 1904:—

Average Number of Inmates.		Admissions.		Discharges Recovered.		Discharges not Recovered.		Deaths.	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
46·0	5·5	9	0	1	0	8	3	0	0

The inmates at 31st December 1904 were classified as follows:—

1. Found to be insane in bar of trial, and detained during His Majesty's pleasure, ...	35
2. Found to have been insane at time of committing offence, and detained during His Majesty's pleasure, ...	8
3. Sentenced to death, but respited, or sentence commuted on account of insanity, ...	—
4. Convicts whose sentences had expired, ...	—
5. Imprisonment prisoners whose sentences had expired, . .	—
6. Convicts whose sentences had not expired, ...	5
7. Imprisonment prisoners whose sentences had not expired, .	2
	50

The Reports of the Commissioners upon the condition of the inmates of the Lunatic Department of the General Prison, Perth, show that at the times of the visit they were in good health and that their behaviour was, on the whole, quiet and orderly. The classification of the inmates of the male division into those who are quiet and well behaved and a minority who are turbulent and occasionally violent, has had an excellent effect upon the mental condition of the men. It is found necessary to keep two men, who

Establishment for State and Criminal Lunatics.

are impulsive and dangerous, in seclusion for prolonged periods. It is stated that the industrial employment of the patients is systematically attended to with good results. The ground in the exercise yard in connection with the south ward has been laid in cement, an improvement, it is said, of value in more than one respect. The wards were found in good order, clean, and well ventilated.

Lunatics in Private Dwellings.

III. LUNATICS IN PRIVATE DWELLINGS.

All Pauper Lunatics but not all Private Lunatics in Private Dwellings are under jurisdiction of Board.

It will be useful to repeat here the brief statement which has been given in previous Reports, describing the position occupied by patients in private dwellings in Scotland, and the amount of official supervision which they receive.

All private patients, if they are detained in establishments for the insane, come under the supervision of the Board, and all pauper patients, whether provided for in establishments or in private dwellings, are intimated to the Board, placed on the register, and brought under supervision.

But in the case of private patients in private dwellings—that is, insane persons who are not paupers, and who are not placed in establishments for the insane—it is not required by the statutes that all of them should be under the supervision of the Board. The circumstances which bring under the Board's supervision an insane person who is not a pauper and who is not placed in an establishment are the following:—

1. If he is kept in a private dwelling for profit, unless he is a patient in regard to whom it is certified by a registered medical practitioner that he is afflicted with a malady which is not confirmed, and that it is expedient to place him for a temporary residence, not exceeding six months, in the house in which he is so kept.

2. If, whether kept for profit or not, he has been insane for more than a year, and is subjected to compulsory confinement to the house, to restraint or coercion, or to harsh and cruel treatment.

3. If he possesses property which has been placed under curatory by a Court of Law.

The Board have therefore no official knowledge of a large number of insane persons living at home under the care of their natural guardians, provided they are neither paupers, nor kept for profit, nor restrained, nor cruelly used.

Numbers for 1904.

Number of Private Lunatics in Private Dwellings.

The number of private lunatics who were provided for in private dwellings, with the sanction of the Board, on the 1st of January 1905, was 125. Of these, 57 were persons whose means have been placed under curatory by the Court of Session or by a Sheriff Court. Of the whole number of private patients in private dwellings, 42 were in houses which possessed special licences for the reception of not more than four patients, and 83 were placed singly in houses which, having only one patient, require no licence.

All pauper lunatics, wherever placed, come upon the register of the Board, and we are fully informed as to the mode in which they

are provided for, and of every important fact in their history. The relation of the central authority to every individual member of the pauper class of the insane is peculiar to Scotland. In no other country is every lunatic whose maintenance is contributed to from public sources under the direct supervision of the central authority. The number of pauper patients provided for with the sanction of the Board in private dwellings on 1st January 1905 was 2704, showing an increase of 46 compared with the preceding year. Of these, 969 are boarded with guardians who are relatives, and 1735 with unrelated guardians. Of the pauper patients with unrelated guardians, about two-thirds are in private dwellings specially licensed to receive 2, 3, or 4 patients. The remainder, as well as almost all patients with related guardians, are accommodated singly in houses which, having only one patient, require no special licence. The number admitted during the year to the roll of pauper patients in private dwellings was 322, which is 36 more than last year. Of these, 119, or 20 more than last year, were resident in private dwellings when first reported to the Board and remained with our sanction under private care, and 203, or 16 more than last year, were removed from asylums. Of the total number of patients in private dwellings, 30 were certified sane during the year, 22 were removed from the poor-roll by their friends, 111 were removed to asylums, and 113 died—the death-rate being equal to 42 per 1000.

Lunatics in Private Dwellings.

Number of Private Lunatics in Private Dwellings.

Number of Pauper Lunatics in Private Dwellings.

The following Table shows the number of pauper patients so provided for at 1st January 1881, and at 1st January of each subsequent fifth year to 1896, and for each of the following nine years to 1905, distinguishing between those resident with related guardians and those resident with unrelated guardians.

Years.	Resident with Relatives.	Boarded with Strangers.	Total.
1881	906	610	1,516
1886	967	1,091	2,058
1891	1,043	1,446	2,489
1896	1,009	1,691	2,700
1897	1,009	1,658	2,667
1898	1,009	1,645	2,654
1899	1,039	1,663	2,702
1900	1,020	1,683	2,703
1901	987	1,682	2,669
1902	954	1,677	2,631
1903	987	1,655	2,642
1904	977	1,681	2,658
1905	969	1,735	2,704

Lunatics in Private Dwellings.

Number of Pauper Lunatics in Private Dwellings.

It will be observed that the total number rose throughout the period embraced in the Table, and sometimes with great rapidity, from 1516 in 1881 to 2700 in 1896, an increase during these fifteen years of 1184, or 78 per cent. Since 1896 the total number has fluctuated somewhat, but attained the highest point it has ever reached this year, namely, 2704.

On examining the column of the Table giving the number resident with relatives, it will be seen that a rise occurred in the ten years from 1881 to 1891, from 906 to 1043, which was mostly contributed by the Highland counties, and that during the succeeding thirteen years the tendency has been towards a fall, the number for the past year being 969.

The pauper insane boarded with unrelated guardians are those to whom alone the term "boarded out" is properly applicable. With few exceptions, they are patients who have been formerly inmates of asylums, from which they have been removed and placed as boarders under the private care of strangers while still in a condition of insanity.

An examination of the column dealing with those boarded with strangers shows that in the five years from 1881 a rise occurred of 481; in the five years to 1891 a rise of 355; and in the five years to 1896 a rise of 245—an increase during the fifteen years of 1081, or 177 per cent. The present year shows a rise of 54 over last year; but since 1896, the figures on the whole show a tendency to fall rather than to rise, and it cannot be overlooked that the fall or arrested increase shown has taken place notwithstanding a large increase of population and an ever-increasing number of patients in establishments. The proportion of patients in private dwellings both to the total number of the insane and to population has thus decreased of late years at a rate which this actual number does not disclose.

Private Dwellings specially Licensed.

Private Dwellings Specially Licensed.

The tabular statement below shows the number of private dwellings specially licensed for pauper patients, classified in accordance with the number of patients they contained, and the number and sex of the patients resident in each class, at 31st December 1904:—

Classes of Houses Specially Licensed for Pauper Patients, containing at 31st December 1904.	Number of Specially Licensed Houses in each Class.	Sex of Patients in each Class.		Total Number of Patients in each Class.
		M.	F.	
Two Patients, . .	341	259	375	634
Three Patients, . .	101	67	222	289
Four Patients, . .	52	52	149	201
Totals, . .	494	378	746	1124

Private Dwellings specially Licensed.

It will be seen from this statement that of all the pauper lunatics provided for in specially licensed houses, considerably more than half are in houses which contain only two patients, and that of the patients accommodated in houses containing three or four patients, more than two-thirds are females.

General Reports on the Visitation of Patients.

Lunatics in Private Dwellings.

General Reports on Visitation of Patients.

We present as usual in Appendix C the general reports on the visitation of patients in private dwellings.

Dr. John Macpherson undertook the visitation of the patients under private care in the County of Ross, and he reports favourably of their condition. He says:— "On the whole, the "standard of comfort and the mode of life led by these patients "is the same as that of their guardians, and in no instance was it "suspected that the patient was at a disadvantage in the partici- "pation of a full share of the family life."

Dr. Sutherland, in his general report, deals with the question of the saving which could be effected in many parishes if those patients who have ceased to benefit by or need asylum care were boarded out in private dwellings in the proportion shown to be attainable in other parishes which have made systematic efforts to provide for suitable unrecovered patients in that way.

Dr. Charles Macpherson's general report contains the result of an enquiry made by him, at the Board's request, into the question as to whether the relatively small amount of insanity reported in the Islands of South Uist and Barra as compared with that reported in North Uist, to which attention was drawn in our last Report, is a real difference or only an apparent difference due to local administration or to failure to make correct census returns on the subject. He comes to the conclusion that the difference is real, and gives facts with regard to the heredity of the pauper section of the insane in these Islands which are of great scientific interest and value.

IV. POSITION OF DISTRICTS.

Position of Districts.

List of Districts and Counties which form them.

For lunacy purposes Scotland is at present divided into the following Districts:—

Counties from which the different Districts are formed.	Lunacy Districts arranged geographically.
Shetland,	1. Shetland District.
Orkney,	2. Orkney do.
Caithness,	3. Caithness do.
Inverness, Nairn, Ross, and Sutherland,	4. Inverness do.
Elgin,	5. Elgin do.
Banff,	6. Banff do.
Aberdeen,	7. Aberdeen County, consisting of all the parishes of Aberdeenshire, except Aberdeen City Parish. 8. Aberdeen City, consisting of the parish of that name.
Kincardine,	9. Kincardine District.
Forfar,	10. Forfar District, consisting of all the parishes of Forfarshire, except Dundee Combination. 11. Dundee District, consisting of the parish of Dundee Combination.

Position of Districts.

List of Districts and Counties which form them.

Counties from which the different Districts are formed.	Lunacy Districts arranged geographically.		
Perth,	12. Perth District.		
Stirling, Dumbarton, Linlithgow, and Clackmannan,	13. Stirling	do.	
Fife and Kinross,	14. Fife and Kinross District.		
Edinburgh and Peebles,	15. Edinburgh District, consisting of the parish of Edinburgh.		
	16. Leith District, consisting of the parish of Leith.		
	17. Midlothian and Peebles District, consisting of the remaining parishes of Midlothian and of the county of Peebles.		
Haddington,	18. Haddington District.		
Roxburgh, Berwick, and Selkirk,	19. Roxburgh	do.	
Lanark,	20. Glasgow	do.	Consisting respectively of the parishes of the same names.
	21. Govan	do.	
	22. Lanark	do.	Consisting of remaining parishes of Lanarkshire.
Renfrew,	23. Renfrew	do.	Consisting of parishes of Renfrewshire, including entire parishes of Cathcart and Eastwood, which are partly within Lanarkshire.
Argyll,	24. Argyll	do.	
Bute,	25. Bute	do.	
Ayr,	26. Ayr	do.	
Dumfries, Kirkcudbright, and Wigtown,	27. Dumfries	do.	

Shetland District. The pauper lunatics of the Shetland District are accommodated, under agreement, in the Royal Asylum at Montrose.

Orkney District. Pauper lunatics of the Orkney District are received into the Edinburgh Royal Asylum.

Caithness District. Under an agreement with the Managers of the Montrose Royal Asylum, pauper lunatics belonging to the Caithness District who need asylum treatment continue to be sent to that establishment.

Inverness District. The pauper lunatics of the Inverness District, which includes the counties of Inverness, Nairn, Ross, and Sutherland, continue to be accommodated in the District Asylum at Inverness. Additional accommodation for about 57 patients is to be provided in the buildings on the newly acquired land at Kinmylies.

Elgin District. The Elgin District Asylum provides adequately for the wants of the District.

Banff District. The Banff District is adequately provided with accommodation in the asylum at Ladysbridge.

Aberdeen County Lunacy District. The pauper lunatics of the Aberdeen County Lunacy District, which consists of all the parishes of the county except Aberdeen City Parish, are accommodated in the Aberdeen Royal

Asylum, under an agreement with the directors of the asylum, and in the lunatic wards of Buchan Poorhouse. Position of Districts.

The pauper lunatics of the Aberdeen City Lunacy District are accommodated in the new District Asylum at Kingseat, and in the Aberdeen Royal Asylum, under a temporary agreement. The District Asylum at Kingseat, constructed on the village plan, and situated 11½ miles by rail from Aberdeen, was opened last spring. Aberdeen City District.

The pauper lunatics of the Kincardine Lunacy District are accommodated in the Montrose Royal Asylum under an agreement, and in the lunatic wards of the Kincardine Poorhouse at Stonehaven. Kincardine District.

The pauper lunatics of the Forfar District, which consists of all the parishes in the county except Dundee, are accommodated in the Royal Asylum of Montrose, under an agreement. Forfar District.

The pauper lunatics of the Dundee District are accommodated in the newly acquired District Asylum at Westgreen and in the lunatic wards of the Dundee East Poorhouse, with the exception of 25 to be accommodated for a few years in the Montrose Royal Asylum. Dundee District.

The District Asylum at Murthly and the lunatic wards of the Perth Poorhouse provide accommodation for the pauper lunatics of the Perth District. Perth District.

The pauper lunatics of the Stirling District are adequately accommodated in the District Asylum at Larbert and in the lunatic wards of the Linlithgow and Dumbarton Poorhouses. Stirling District.

The pauper lunatics of the counties of Fife and Kinross are provided for in the District Asylum at Springfield, near Cupar. Fife and Kinross District.

The Edinburgh District is at present supplied with asylum accommodation in the Royal Edinburgh Asylum, the four villas opened last spring at Bangour, the lunatic wards of the poorhouse at Craiglockhart, situated there and at Middleton Hall, near Uphall, and in several other asylums, pending the completion of the Bangour Village Asylum, the erection of which has made rapid progress during the past year. Edinburgh District.

Leith District, which consists of the Parish of Leith, is supplied with asylum accommodation by the Royal Edinburgh Asylum. Leith District.

The pauper lunatics of the Midlothian and Peebles District are adequately accommodated in the District Asylum at Rosewell, and to a small extent in the lunatic wards of the Inveresk Combination Poorhouse. Midlothian and Peebles District.

Position of Districts.

Haddington District.

The pauper lunatics of the Haddington District are accommodated in the Haddington District Asylum, and to a small extent in the lunatic wards of Inveresk Combination Poorhouse. The accommodation afforded by the District Asylum is fully occupied, and unless a considerable number of patients can be removed to private care an extension of the asylum will be necessary.

Roxburgh District.

The Roxburgh District Asylum at Melrose provides accommodation for the pauper lunatics of the counties of Roxburgh, Berwick, and Selkirk. The asylum is overcrowded both on the male and the female side. The new hospital for males will on completion relieve the overcrowding on the male side, but on the female side there is every probability that immediate steps for an extension will be necessary.

Glasgow District.

The pauper lunatics of the Glasgow District, which consists of the parish of Glasgow, are accommodated in the District Asylums at Lenzie and Gartloch.

Govan District.

The pauper lunatics of the Govan District are accommodated in the District Asylum at Hawkhead, Paisley, in the Kirklands Asylum at Bothwell, and in the lunatic wards of Govan Poorhouse.

Lanark District.

The pauper lunatics of the Lanark District are accommodated in the District Asylum at Hartwood, Shotts, in the Kirklands Asylum at Bothwell, and in the lunatic wards of the poorhouse at Old Monkland.

Renfrew District.

The pauper lunatics of the Renfrew District are accommodated chiefly in the two Parochial Asylums of Paisley at Riccartsbar and Craw Road, and in Greenock Parochial Asylum.

The Renfrew District Board are proceeding with the erection of a District Asylum at Dykebar, near Paisley. When this asylum has been completed it will accommodate all the pauper lunatics of the District, except those belonging to the Parishes of Paisley and Greenock, which will continue to provide for their patients in the asylums belonging to themselves. The asylum is to be of the detached or village type, and will thus resemble the Aberdeen City Asylum at Kingseat and the Edinburgh District Asylum at Bangour. We have urged in this case as in other cases that the buildings should be of as simple and inexpensive a character as possible.

Argyll and Bute District.

The pauper lunatics of the Districts of Argyll and Bute are accommodated in the District Asylum at Lochgilphead. Including the ground occupied by buildings and roads, the extent of land attached to the asylum is only 50 acres, which is inadequate for an asylum of its size.

Ayr District.

The pauper lunatics of the Ayr District are accommodated in the Ayr District Asylum and in the lunatic wards of the Cunninghame

Combination Poorhouse. An hospital to accommodate 120 patients is being erected at the District Asylum. Position of Districts.

The pauper lunatics of the Dumfries District, which consists of the Counties of Dumfries, Kirkcudbright, and Wigtown, are accommodated in the Crichton Royal Institution and in the lunatic wards of the Wigtown Poorhouse. A new sanatorium for phthisical patients, and new accommodation of a hospital character for the pauper patients who are provided for in the Second House of the Institution, have been completed. Dumfries District.

V.—WANT OF ACCOMMODATION FOR THE POORER CLASS OF PRIVATE PATIENTS.

Want of Accommodation for the Poorer Class of Private Patients.

We entered into a full discussion of this subject in our Thirty-ninth Annual Report. We repeat the opinion that permissive power should be given by statute to District Lunacy Boards to provide accommodation for private patients under the conditions we indicated as desirable, and we have reason to believe that legislation in the direction suggested would tend to relieve the rates and would be approved of by District Lunacy Boards.

VI. COST OF DISTRICT ASYLUMS.

Cost of District Asylums.

Causes of Difficulty in arriving at the true Cost of Asylums.

The ever-growing demand for additional accommodation for the insane, the large scale on which it has been found necessary in many cases to provide it, and the magnitude of the expenditure involved have recently been the subject of much discussion. We have for long urged upon District Lunacy Boards that all asylum buildings should be of the utmost simplicity compatible with efficiency for their special purpose, and that no expenditure should be incurred on external ornament or in other similar directions which are contrary to a strict economy, and which in no way contribute to the amelioration of the condition of the insane. We have reason to think that these views will have the effect of diminishing the cost of asylums, especially where they are erected as detached and more or less independent buildings of comparatively small size, as such buildings do not offer inducements to the creation of special architectural effects which large and lofty structures to some extent call for in the desire to avoid unattractive elevations. There are, however, many things about asylums less obvious than architectural features but more costly, and which are absolutely indispensable; and notwithstanding our efforts towards economy, asylums still remain institutions of an exceptionally expensive character. It is, however, not an easy matter to arrive at a conclusion as to what is really the cost of an asylum, and in what the cost specially consists. Questions on the subject are frequently put to us, and especially questions with regard to the comparative cost of asylums, which are exceedingly difficult if not impossible to answer except with reservations and explanations which for practical purposes leave the answer of little value. Among the

Cost of District Asylums.

Causes of Difficulty in arriving at the true Cost of Asylums.

many causes which render such comparisons in most cases useless, the following may be mentioned:—(1) Some asylums possess a considerable extent of land, others very little. In some cases, owing to the time at which the site was acquired or to the necessity of obtaining a site within a limited area and in the neighbourhood of towns, the price of the site has been so great as to form a large part of the cost of the whole establishment, in others, with a wide choice of locality and with plenty of land in the market, the price has been low. (2) The cost of building appears to vary greatly in different parts of Scotland, the differences being probably due to the difficulty in obtaining workmen, who have abundant offers of work nearer their homes, or to the varying degree of difficulty in obtaining suitable stone, and the varying facilities for the transport of stone and other building materials. (3) Asylums are not all equally and at one time furnished with the various appliances and arrangements now regarded as necessary for a completely equipped establishment. One may be furnished with hospitals specially designed for the care of those requiring nursing and other special forms of treatment, another may arrange for these requirements by what may be described as a makeshift; one may have provided nurses' and attendants' homes, mortuary rooms, including arrangements for post mortem examinations and laboratory research, or a farm steading, or a separate chapel, or special arrangements necessitated by situation for water supply, or electric light. In others these and similar things are not provided, and in some cases, in the special circumstances of the asylum, certain of these arrangements may not be called for; but it is easy to see how fallacious comparisons would be which omitted to take such facts into account. (4) Another circumstance which renders it impossible to determine the cost of an asylum with anything like finality arises from the fact that the number of beds—the only proper measure of cost—seldom or never remains the same for any considerable time, and with every increase in numbers the cost per bed falls. Asylums, especially the newer and larger asylums, have been so planned as to enable them eventually in many departments to provide for a much larger number of patients than the buildings as originally completed could contain. The expense, for instance, of land, water, drainage, farm buildings, roads, superintendent's house, administrative buildings, kitchen, stores, workshops, amusement hall, lighting, etc., will not require to be provided afresh for future extensions unless they happen to be on a much more extensive scale than was originally contemplated. In most cases, especially in the case of new asylums recently erected, large extensions of accommodation for patients may be made at a cost probably not exceeding one-fourth of the cost per bed calculated on the cost of the asylum as originally designed. Even in the case of two asylums erected at about the same time and the same cost, differences in the cost per bed may soon show themselves from the fact of the one asylum filling rapidly and the other not. Taking all these considerations into account, it will be obvious that comparisons as to cost are futile, because they rest upon conditions which are not the same in any two asylums, and which even in the case of any one asylum are shifting from year to year.

Owing to these changes, large outlays in the original cost of an asylum may in the course of time be lost sight of, and another asylum, originally erected with a greater regard to economy, may appear as equally costly, or even as more costly. Cost of District Asylums.

On the whole, there is no better method of showing the comparative cost of asylums than by measuring such cost by the amount which the ratepayer has to pay to meet the entire outlay. The cost of an asylum can thus be traced from year to year, and it forms a perfectly reliable measure of cost, because it is wholly real and omits nothing. Cost of Asylums best measured by Assessments in payment of them.

Tables on this subject were first given in our Forty-first Report, in which the comparative cost of the District Asylums was somewhat fully discussed,* and similar Tables have been given in subsequent years with more abbreviated remarks.

The annual assessments for lunacy purposes, which form the basis for the figures in the following Table I., are levied on lands and heritages within Lunacy Districts which possess District Asylums. They include interest on all sums borrowed to purchase land, and to build or add to asylums, together with instalments in repayment of principal sums borrowed (which must be repaid within thirty years from the time of borrowing), and also such smaller outlays in connection with the building as it is thought desirable to pay off year by year. In this Table the amount of these assessments in all Scotland, for each year included in it, has been divided by the average number of patients resident during that year in District Lunacy Assessments for Scotland as a whole.

TABLE I.

Showing for all District Asylums in Scotland (1) the average number of patients resident in each year named, (2) the amount of assessment for providing accommodation per head of patients resident, (3) the expenditure for the maintenance of each patient, and (4) the total cost per patient:—

Years.	Average Number of Patients Resident in District Asylums. 1.	Annual Assessment per Patient to provide Land and Buildings. 2.	Net Annual Cost per Patient of Food, Clothing, Management, &c. 3.	Total Cost per Patient. 4.
		£ s. d.	£ s. d.	£ s. d.
1868–1869	1132	27 8 2	...	...
1878–1879	2553	12 3 2	...	...
1888–1889	2996	10 16 2	23 10 0	34 6 2
1889–1890	3057	12 5 4	24 2 8	36 8 0
1890–1891	3148	13 4 3	23 8 8	36 12 11
1891–1892	3223	12 15 11	23 11 4	36 7 3
1892–1893	3290	13 1 9	23 14 10	36 16 7
1893–1894	3346	15 2 7	22 10 4	37 12 11
1894–1895	3462	14 5 1	23 1 10	37 6 11
1895–1896	3951	14 18 8	23 11 4	38 10 0
1896–1897	4319	14 15 8	23 7 10	38 3 6
1897–1898	4898	15 6 4	24 12 6	39 18 10
1898–1899	5304	14 15 8	25 1 10	39 17 6
1899–1900	6353	15 18 9	25 5 7	41 4 4
1900–1901	6561	16 6 8	26 18 1	43 4 9
1901–1902	6759	16 14 1	25 17 10	42 11 11
1902–1903	7064	17 9 3	25 16 5	43 5 8
1903–1904	7239	19 7 9	27 3 5	46 11 2

* Forty-first Annual Report, pp. l.-lvi.

Cost of District Asylums.

Asylums, and the result shows in column 2 the average amount assessed for per occupied bed. In making the calculations in this Table no assessment of the kind made at any time has been omitted. For instance, assessments for debt incurred by the original Glasgow District Board have been included, though the money raised by them did not result in the erection of a District Asylum, as also are the assessments for the Kirklands Asylum (an asylum provided jointly by two Lunacy Districts, but not in the strict sense a District Asylum), and for new asylums only in process of erection.

Causes influencing Rates of Assessment.

The first of the District Asylums which may be regarded as having been erected as an immediate consequence of the passing of the Lunacy Act of 1857 was opened in 1863, and the last of that original group in 1874. Expenses in connection with the erection of these asylums were necessarily incurred for many years before they were ready for the reception of patients, and even after they were opened, several years would elapse during which the accommodation provided would only be partially occupied. Thus in 1868-69, the earliest year embraced in the Table, when there were only 1132 patients resident in District Asylums, the outlay on asylum lands and buildings, when calculated on the number of patients resident, shows the high average of £27 8s. 2d. Ten years after this period the expenses connected with providing asylums had fallen to £12 3s. 2d. per head of the patients resident, and ten years subsequent to that, in 1888-89, to £10 16s. 2d., though during these periods many additions to the accommodation must have been made. Up to 1888, and for many years later, the patients of the populous county of Lanark, including the city of Glasgow, were provided for chiefly in the Glasgow Royal Asylum, and in parochial asylums belonging to the large parishes connected with Glasgow. In 1888 the county, which until then had been one Lunacy District, was divided into several districts, and expenses immediately began to be incurred through steps being taken towards the erection of District Asylums. The last of the three large and costly asylums subsequently founded was only fully completed after May 1898. Since that year, the Dundee District Lunacy Board has acquired an asylum, a new asylum has been erected for the Aberdeen City District, and expenditure has been incurred by the Edinburgh and Renfrew Districts in the erection of new asylums. The expenses in connection with all these are included in Table I. The Table shows that at May 1904 the pauper lunatics of Scotland maintained in District Asylums were costing the country a yearly rent per bed of £19 7s. 9d., which, added to the average cost for the food, clothing, and management of the patients at that date, gives the total cost of pauper lunatics in all District Asylums as £46 11s. 2d. per patient.

Assessments to defray Cost of each District Asylum.

The following Table II. is based, like Table I., on the assessments on counties and burghs to defray the cost of land and buildings. It shows for each District Asylum the year in which the asylum was opened or became a District Asylum, the number of patients accommodated, and the assessment per patient for the year 1868-69, which is a few years after most of the asylums were erected, and for the year 1878-79, that is ten years afterwards, and for each subsequent year up to 1903-04.

TABLE II.

ASSESSMENTS on Counties and Burghs to defray Cost of Land and Buildings in the case of the Asylums named (including instalments in repayment of principal sums borrowed) per head of Patients accommodated in each Year named.

Years.	DISTRICT ASYLUMS.																																	
	Argyll. (Opened 1863.)		Ayr. (Opened 1869.)		Banff. (Opened 1865.)		Elgin.*		Fife. (Opened 1866.)		Gartloch. (Opened 1896.)		Woodilee.† (Opened 1875.)		Govan. (Opened 1895.)		Haddington. (Opened 1866.)		Inverness. (Opened 1864.)		Lanark. (Opened 1895.)		Midlothian. (Opened 1874.)		Perth. (Opened 1864.)		Roxburgh. (Opened 1872.)		Stirling.‡ (Opened 1869.)						
	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.	No. of Patients.	Assessment per Patient.				
		£ s. d.		£ s. d.		£ s. d.		£ s. d.		£ s. d.		£ s.		£ s. d.		£ s. d.		£ s. d.		£ s. d.		£ s. d.		£ s. d.		£ s. d.		£ s. d.						
1868–69	137	14 12 0	..	..	88	37 13 8	..	..	232	8 3 10	..	..	..	..	..	..	83	12 1 0	278	16 4 10	..	..	..	..	237	8 8 9	..	..	..	..				
1878–79	305	10 11 2	279	8 19 3	102	13 4 11	84	3 11 5	301	9 19 4	..	..	..	..	..	..	87	9 10 10	379	8 14 2	..	..	237	21 1 11	270	11 2 3	214	14 4 0	..	..				
1879–80	316	10 0 0	281	8 17 11	101	11 2 9	94	4 5 1	318	9 8 8	..	..	..	..	..	..	93	8 18 6	374	9 12 6	..	..	238	18 18 2	268	11 3 11	231	13 3 0	..	..				
1880–81	340	12 10 7	273	9 3 2	116	18 3 7	103	4 17 1	326	10 2 5	..	..	..	..	..	..	93	8 12 1	418	10 11 6	..	..	240	18 15 0	249	17 13 5	240	15 13 4	..	..				
1881–82	366	8 9 5	259	9 13 1	129	12 11 0	97	3 1 10	344	8 14 5	..	..	..	..	..	..	102	7 12 11	419	7 12 9	..	..	221	20 7 3	267	11 4 9	246	16 5 2	..	..				
1882–83	351	5 11 1	280	8 18 7	122	13 16 1	108	8 6 8	327	10 7 11	..	..	..	..	..	..	99	7 13 6	421	9 10 0	..	..	207	19 6 6	253	12 13 0	241	14 10 5	..	..				
1883–84	327	13 3 0	300	8 6 8	126	13 8 3	109	5 10 1	327	10 11 0	..	..	..	..	..	..	101	7 6 6	437	9 3 1	..	..	215	8 12 1	251	10 15 2	201	15 18 5	..	..				
1884–85	341	12 0 6	301	8 6 1	129	14 15 10	116	3 9 0	349	8 11 11	..	..	..	..	..	..	109	6 12 1	433	9 4 9	..	..	230	17 7 10	260	10 7 8	206	19 8 4	..	..				
1885–86	356	11 7 6	300	11 13 4	137	10 8 4	119	2 10 5	358	8 18 9	..	..	..	..	..	..	100	7 4 0	427	8 8 7	..	..	223	17 18 9	266	12 8 1	201	19 18 0	..	..				
1886–87	381	12 4 1	286	8 14 6	136	11 7 2	127	3 3 0	362	6 18 1	..	..	..	..	..	..	102	7 1 2	431	8 14 0	..	..	205	19 10 3	272	12 2 8	202	19 16 0	..	..				
1887–88	394	10 18 3	289	8 13 0	141	8 19 2	125	3 4 0	367	6 16 3	..	..	..	..	..	..	102	6 7 5	431	8 4 9	..	..	203	19 14 1	269	11 10 6	189	18 10 4	..	..				
1888–89	365	12 6 7	297	8 8 4	143	7 18 2	128	5 9 5	378	7 18 9	..	..	..	..	..	..	106	6 2 8	450	7 4 5	..	..	204	23 0 9	285	10 10 6	200	18 15 0	..	..				
1889–90	354	12 8 7	312	6 8 2	141	7 15 11	129	7 15 0	383	7 16 8	..	..	..	..	..	..	114	6 2 10	457	7 13 1	..	..	231	19 9 7	303	10 11 3	210	17 17 2	..	..				
1890–91	360	12 10 0	342	5 17 0	133	8 0 7	132	5 6 1	400	7 10 0	..	..	..	..	..	..	118	5 18 8	477	7 10 11	..	..	239	12 11 1	312	11 4 4	209	17 18 10	426	7 19 7				
1891–92	371	14 0 4	351	2 17 0	129	13 9 2	141	7 1 10	426	7 0 10	..	..	..	..	..	..	126	5 11 1	486	9 19 11	..	..	235	12 15 4	315	9 16 10	210	17 17 2	433	7 17 1				
1892–93	373	10 19 10	359	2 15 9	130	8 17 6	148	5 1 4	442	6 15 9	..	..	..	..	..	..	125	6 8 0	484	8 13 8	..	..	233	23 12 1	310	7 1 11	227	16 10 5	459	8 14 4				
1893–94	383	11 4 7	398	6 5 8	140	8 5 0	158	5 5 1	446	6 14 6	..	..	..	..	..	..	128	6 5 0	410	6 14 2	..	..	231	21 12 11	316	6 19 3	237	15 16 5	499	9 0 4				
1894–95	398	11 6 2	422	5 18 6	141	3 16 5	153	4 14 9	443	9 0 7	..	..	..	..	..	..	130	5 0 0	433	6 7 0	..	..	223	19 1 2	318	6 5 9	242	15 9 11	559	8 1 0				
1895–96	411	11 8 9	429	5 16 7	145	7 12 5	156	4 17 5	448	6 13 11	..	..	..	..	..	..	139	3 19 2	457	9 6 7	..	..	233	16 1 11	318	6 5 9	242	15 9 11	561	8 0 5				
1896–97	414	11 16 9	442	5 13 1	149	2 7 1	156	5 9 0	471	6 7 5	..	..	..	..	..	..	146	4 3 7	489	5 10 5	428	27 14 5	236	14 16 7	333	6 0 1	259	15 8 11	571	9 9 2				
1897–98	421	10 16 2	450	6 13 4	153	2 5 4	156	5 9 0	488	6 14 0	..	..	..	..	..	..	144	5 4 2	518	5 15 10	468	29 13 10	229	15 5 8	342	6 8 8	264	17 19 10	610	8 3 11				
1898–99	440	10 9 1	483	7 4 11	155	4 15 10	152	6 8 7	515	6 15 11	466	30 15 5	..	..	404	28 10 5	141	4 12 2	544	5 17 10	522	28 9 0	234	17 1 11	362	6 1 7	286	17 9 8	600	9 3 4				
1899–1900	446	11 12 9	498	7 0 7	155	5 1 10	158	6 0 3	522	7 1 9	470	31 0 8	736	22 1 0	467	26 0 5	143	4 17 7	570	9 6 0	634	25 13 3	243	20 11 6	364	6 0 11	303	16 10 0	644	9 6 4				
1900–1901	434	8 7 6	488	7 3 5	163	3 5 8	182	5 9 10	533	6 11 4	522	29 6 10	818	19 15 8	452	27 9 7	135	5 18 10	583	9 1 10	690	25 3 10	248	24 3 10	358	6 14 1	298	15 18 10	657	9 14 10				
1901–1902	433	9 1 9	480	7 5 10	164	4 1 10	180	5 11 1	534	7 9 10	568	27 9 8	856	19 0 2	458	39 1 11	142	5 12 8	590	9 3 1	741	23 12 1	262	25 15 3	366	7 18 6	304	13 9 9	681	9 10 11				
1902–1903	428	8 11 4	514	6 16 2	171	5 8 4	174	4 14 10	547	7 6 3	613	29 7 3	889	19 18 8	483	36 1 1	153	5 11 1	602	9 9 4	834	20 11 3	295	24 11 6	371	7 5 7	308	12 19 9	682	9 10 7				
1903–1904	432	7 19 9	520	6 14 7	175	5 12 3	172	5 16 3	562	7 2 4	636	32 7 10	879	26 7 10	480	36 9 7	161	5 11 10	637	10 4 1	877	19 11 1	334	22 9 1	376	7 19 7	317	14 3 11	681	9 10 11				
Average Assessment per Patient	..	11 8 0	..	7 6 4	..	8 14 3	..	5 1 10	..	7 18 0	..	30 1 3	..	21 8 8	..	32 5 6	..	6 6 1	..	8 2 1	..	25 1 1	..	19 3 2	..	9 7 11	..	16 8 6	..	8 17 4				

* Elgin Asylum, formerly part of Gray's Hospital, was acquired as a District Asylum in 1858.
† Woodilee Asylum was opened in 1875 as a Parochial Asylum, and there was no Lunacy Assessment under the Lunacy Acts until after it became a District Asylum in 1898.
‡ The original debt on the Stirling Asylum was paid off by a few large assessments soon after its erection, and no assessment was subsequently levied until 1890–91, when such became necessary owing to large extensions.

Cost of District Asylums.

Assessments to defray Cost of each District Asylum.

In all cases the figures relating to the first few years after the opening of the asylums have been omitted, as asylums have in most cases taken a considerable time to fill, and calculations based upon the number of patients in very early years after their opening would be misleading. The asylums first erected were all small and wanting in many of the requirements which would now be regarded as necessary to a properly equipped asylum. Some of these deficiencies have been more or less completely supplied in subsequent years. The cost per bed, however, even in these older asylums remained high for some years owing to the slowness with which they filled. Thus the Banff District Asylum was, three years after its opening, costing £37 13s. 8d. per bed, though it eventually became one of the cheapest asylums. In the case of the oldest asylums the original debt has been extinguished, but the assessments have been maintained, and even in some cases increased, while debt was being extinguished, through the necessity for enlargement and reconstruction. The cost of extensions, necessary improvements, and reconstructions has been in some cases, and notably in the case of the Midlothian District Asylum, so great as to equal, if not to surpass, the original outlay. Hence the cost per bed has in many cases risen of late years, notwithstanding the increase of numbers accommodated. The rise and fall of assessments, which sometimes appear from year to year, are probably due to more than usually extensive repairs or to outlays for new buildings and reconstructions of a minor character which District Boards have chosen to assess for at once rather than to meet by borrowing.

Method of estimating Cost.

It may be proper to explain here that the number of patients accommodated has been taken as the measure of cost, rather than the estimated bed accommodation of each asylum. This has been done on account of the great difficulty in arriving at the true capacity of asylums owing to constant changes resulting from rearrangement of existing accommodation, its adoption to purposes for which it was not intended, and the disproportions occurring between dayroom and dormitory space. It should, however, be kept in view that an overcrowded asylum appears as cheaper than it should appear, while in cases in which there is vacant accommodation, the assessment per patient may make the asylum appear at a disadvantage as regards cost when compared with an equally expensive asylum which is fully occupied.

It will be understood that the figures in this Table give no indication of the actual burden on the ratepayer. That depends upon the valuations upon which the assessments are imposed, and may be higher in some of the cheapest asylums than in others in which the cost of providing the asylum has been greatest.

Providing and Maintenance Rates.

The following Table III. shows for all District Asylums the average number of patients resident during the year 1903-1904, the expenditure per head for providing accommodation, the expenditure per head for the maintenance of patients, and the total cost per patient.

[TABLE.

Cost of District Asylums.

Providing and Maintenance Rates.

TABLE III.

Asylums.	Average Number of Patients Resident. 1.	Providing Expenses per Patient. 2.	Net Maintenance Expenses per Patient. 3.	Total Cost per Patient. 4.
		£ s. d.	£ s. d.	£ s. d.
1. Argyll,	432	7 19 9	24 17 10	32 17 7
2. Ayr,	520	6 14 7	27 7 1	34 1 8
3. Banff,	175	5 12 3	21 16 7	27 8 10
4. Elgin,	172	5 16 3	22 8 2	28 4 5
5. Fife,	562	7 2 4	25 13 1	32 15 5
6. Gartloch,	636	32 7 10	33 0 10	65 8 8
7. Woodilee,	879	26 7 10	29 16 5	56 4 3
8. Govan,	480	36 9 7	30 5 1	66 14 8
9. Haddington,	161	5 11 10	22 2 7	27 14 5
10. Inverness,	637	10 4 1	26 10 4	36 14 5
11. Lanark,	877	19 11 1	21 17 5	41 8 6
12. Midlothian,	334	22 9 1	29 2 8	51 11 9
13. Perth,	376	7 19 7	26 2 3	34 1 10
14. Roxburgh,	317	14 3 11	29 13 8	43 17 7
15. Stirling,	681	9 10 11	28 5 11	37 16 10
Averages,	..	19 2 2	27 3 5	46 5 7

It will be seen from this Table that the present payment towards providing accommodation is on the average £19 2s. 2d., varying from £5 11s. 10d. in the Haddington Asylum to £36 9s. 7d. in the Govan Asylum; that the average present cost of maintaining the patients is £27 3s. 5d., varying from £21 16s. 7d. in the Banff Asylum to £33 0s. 10d. in the Gartloch Asylum; and that the present total average cost per patient in the whole group is £46 5s. 7d., at the two extremes being Banff with a total cost of £27 8s. 10d. and Govan with a total cost of £66 14s. 8d. The cost of maintenance does not vary so greatly as the cost of providing accommodation, and it is the latter figure which therefore chiefly determines variations in the total cost.

Some of the asylums embraced in the foregoing Tables accommodate private patients. These are few in number, and the rates of board paid are sometimes little, if at all, in excess of the rates paid for pauper patients. In cases where a profit is made it is applied equally in the reduction of building and maintenance rates. The figures upon which the calculations are made therefore include private patients.

Expenditure for Maintenance of Pauper Lunatics.

VII. EXPENDITURE FOR MAINTENANCE OF PAUPER LUNATICS.

Expenditure by Parish Councils—Increase.

The expenditure by the Parish Councils of each county, on account of pauper lunatics, is given in Table XXIII. (Appendix A), for the year ending 15th May 1904. From this

Expenditure for Maintenance of Pauper Lunatics.

Table it appears that, for the maintenance of 17,000 pauper lunatics, who were under care for longer or shorter periods during the year, in asylums, lunatic wards of poorhouses, and private dwellings, and for other expenses connected with them, a total sum of £370,474 was paid; of which £289,620 was for maintenance in asylums (including Institutions for Imbecile Children), £22,996 was for maintenance in lunatic wards of poorhouses, £47,392 was for maintenance in private dwellings, and £10,466 was for certification, transport, and other expenses. Of this expenditure £21,425 was repaid by relatives and others, and £115,992 was contributed from the Local Taxation Account, in terms of Section 22 of the Local Government (Scotland) Act, 1889, and of Section 2 of the Education and Local Taxation Account (Scotland) Act, 1892.

The following statement shows the average annual expenditure for the maintenance of pauper lunatics for each period of five years, beginning with 1864–1868 and ending with 1895–1899, and for the years 1899-1900, 1900–1901, 1901–1902, 1902–1903, and 1903–1904, extracted from Table XXIV., and also the average annual number* of patients relieved in each period:—

Years.	Asylums, including Institutions for Imbecile Children.		Lunatic Wards of Poorhouses with Restricted Licenses.		Private Dwellings.		Cost of Certificates, Transport, &c.	Total.	
	Average No. of Patients relieved.	Expenditure.	Average No. of Patients relieved.	Expenditure.	Average No. of Patients relieved.	Expenditure.		Average No. of Patients relieved.	Expenditure.
1864–1868	3,007	£73,416	979	£19,241	1,547	£15,157	£4,400	5,533	£112,214
1869–1873	4,200	105,018	613	10,952	1,474	16,345	4,806	6,287	137,121
1874–1879	5,127	138,278	616	12,790	1,401	17,787	4,809	7,144	173,664
1880–1884	6,220	164,001	699	13,793	1,599	22,554	6,188	8,518	206,536
1885–1889	6,572	169,720	829	15,835	2,125	32,574	6,654	9,527	224,783
1890–1894	7,355	184,564	869	16,558	2,497	40,007	8,193	10,721	249,322
1895–1899	8,584	217,507	872	16,011	2,682	44,515	9,529	12,138	287,562
1899–1900	9,527	253,541	900	17,446	2,706	45,883	9,246	13,134	326,116
1900–1901	9,731	265,602	1,057	24,142	2,650	46,672	9,244	13,437	345,660
1901–1902	9,980	278,144	1,112	22,527	2,814	47,108	9,834	13,906	357,613
1902–1903	10,302	285,664	1,153	22,935	2,637	47,328	10,145	14,092	366,072
1903–1904	10,513	289,620	1,154	22,996	2,631	47,392	10,466	14,298	370,474

Expenditure by Parish Councils—Increase.

The Act of 1857 had for one of its main objects the provision of sufficient accommodation for pauper lunatics, which was then either wholly wanting or deficient in almost every county in Scotland, and it was not until the close of the quinquenniad 1874–79 that the Act can be considered to have attained its object in this direction.

* The average number of patients relieved is the number of patients who received relief *for a whole year*, that is, it is arrived at by taking the total number of days for which relief was given for each year and dividing that number by 365.

Expenditure for Maintenance of Pauper Lunatics.

The results shown in the later years included in the Table cannot therefore be instructively compared with those shown in the earlier years. But comparing the average results shown by the quinquenniad 1880–84, when the legislation of 1857 may be regarded as having taken full effect, with the results shown by the latest year included in the Table, it will be found that the expenditure on patients in asylums has increased from £164,001 to £289,620, or 77 per cent.; in the Lunatic Wards of Poorhouses from £13,793 to £22,996, or 67 per cent.; in Private Dwellings from £22,554 to £47,392, or 110 per cent.; and that the whole expenditure increased from £206,536 to £370,474, or 78 per cent.

Expenditure per head.

It will be seen, however, from the following statement of the annual expenditure per patient that the increased total expenditure from the quinquenniad 1874–1879 up to the quinquenniad 1890–94 was due solely to an increase of numbers, and not to a larger expenditure on each patient. The quinquenniad 1895–1899 showed a rise in the cost per head, and a tendency to rise has on the whole been shown throughout the subsequent years:—

	Expenditure per Patient.			
	In Asylums, including Institutions for Imbecile Children.	In Lunatic Wards of Poorhouses with Restricted Licenses.	In Private Dwellings.	Total average Cost per Patient.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1859–1863	Average Annual Expenditure. 23 17 3	17 11 7	8 13 1	18 11 6
1864–1868	24 8 4	19 13 1	9 15 11	20 6 1
1869–1873	25 0 1	17 17 4	11 1 9	21 16 6
1874–1879	26 19 5	20 15 3	12 13 11	24 6 5
1880–1884	26 7 4	19 14 8	14 2 1	24 5 5
1885–1889	25 16 6	19 1 0	15 6 7	23 12 5
1890–1894	25 1 10	19 1 1	16 0 5	23 5 3
1895–1899	25 6 5	18 7 1	16 12 0	23 13 7
1899–1900	26 12 3	19 7 8	16 19 1	24 16 7
1900–1901	27 5 11	22 16 10	17 12 3	25 14 6
1901–1902	27 17 5	20 5 2	16 14 10	25 14 4
1902–1903	27 14 7	19 17 10	17 18 11	25 19 7
1903–1904	27 11 0	19 18 7	18 0 3	25 18 3

Cost of Land and Buildings only slightly represented in Expenditure Table.

It is necessary to bear in mind that the expenditure, as given in Table XXIV., refers only to the cost of maintenance, which is borne in the first instance by the poor-rate, and contributed to by the State and the relatives of paupers. It does not take into account the expenditure on the purchase of land, and the erection of asylums. These expenses are defrayed out of special assessments on all Lunacy Districts in which District Asylums have been provided, as already explained on pages liii-lviii. In the case of patients boarded in Royal Asylums, or in District or Parochial Asylums not connected with the parishes to which the patients are chargeable, an addition to the charge for maintenance is made

in most cases, in consideration of the accommodation having been provided by the institution, but this addition does not bear any definite relation to the actual cost of the accommodation. Expenditure for Maintenance of Pauper Lunatics.

The contributions towards the maintenance of pauper lunatics made by relatives and obtained from other private sources are shown in the second last column of Table XXIII. These contributions show a steady increase. In 1859 they amounted to £1877, in 1880–1 to £9290, in 1890–1 to £11,687, and in 1903–1904 to £21,425. Repayments by relatives.

The annual Parliamentary Grant in aid of the cost of maintenance of pauper lunatics, first given for the year 1874–75, ceased in 1889, and its place was taken by a fixed contribution towards the cost of maintenance of pauper lunatics of £90,500, in terms of Section 22 of the Local Government (Scotland) Act, 1889. This contribution towards the cost to parishes of maintaining pauper lunatics was supplemented by a further fixed contribution of £25,000 under Section 2 of the Education and Local Taxation Account (Scotland) Act, 1892. Contributions from State Funds.

These contributions are distributed among Parish Councils by the Secretary for Scotland, as nearly as may be in the manner in which the annual Parliamentary Grant was distributed. In allocating the Grant, all expenditure over 8s. a week is excluded. Expenditure under and up to 8s. a week is treated as "admissible expenditure," and the Grant is apportioned upon such expenditure at so much per £ as far as it will go. The State contribution for the year 1903–1904 was equal to about 3s. 4¾d. per week for each patient, however provided for, for whose maintenance a sum was paid equal to or exceeding 8s. a week, which is 1¼d. less than the previous year.

The contributions from State funds towards the maintenance of pauper lunatics, for each year from their commencement, are shown in the following Statement:—

Contributions from State Funds towards Maintenance of Pauper Lunatics.

For the year ending		For the year ending		Approximate Weekly Contribution per Patient from 1892.
14th May 1875,	£59,483	14th May 1890,	£90,474	s. d.
,, 1876,	62,637	,, 1891,	90,450	
,, 1877,	65,470	,, 1892,	115,574	4 7¾
,, 1878,	68,533	,, 1893,	115,717	4 7
,, 1879,	71,272	,, 1894,	115,789	4 6
,, 1880,	73,833	,, 1895,	115,407	4 4
,, 1881,	76,856	15th May 1896,	115,761	4 3
,, 1882,	79,711	,, 1897,	115,778	4 2
,, 1883,	81,495	,, 1898,	115,736	4 0
,, 1884,	83,089	,, 1899,	115,885	3 10
,, 1885,	85,111	,, 1900,	115,920	3 9
,, 1886,	87,164	,, 1901,	115,849	3 8
,, 1887,	88,258	,, 1902,	116,005	3 7
,, 1888,	89,072	,, 1903,	116,116	3 6
,, 1889,	91,335	,, 1904,	115,992	3 4¾

Expenditure for Maintenance of Pauper Lunatics.

Daily Cost of Maintenance in Establishments.

Daily Cost of each Mode of provision for Pauper Lunatics.

The average daily cost of maintenance of pauper patients in the different classes of establishments for the ten years 1894–95 to 1903–1904 is shown in Table XXV. (Appendix A). The general average rate is shown by the Table to be 1s. 5d. a day, which is the same as that for the three previous years.

Table XXVI. (Appendix A) shows, from returns furnished by Inspectors of Poor, the average daily rate of maintenance paid by Parish Councils for each mode of providing for pauper lunatics in each county during the year ending 15th May 1904, and the proportion in which each mode is adopted in each county. It appears from this Table that the daily cost of maintaining pauper lunatics in asylums, in licensed wards of poorhouses, and in private dwellings varies considerably in the different counties.

As regards asylums, the lowest average daily cost per head for a county is 1s. 1¼d. and the highest is 1s. 9½d., which, calculated for the year, would be £20 3s. 0¼d. and £32 13s. 11½d.

As regards the licensed wards of poorhouses, the lowest daily cost for a county is 10d. and the highest is 1s. 3½d., or £15 4s. 2d. and £23 11s. 6d. per annum.

As regards private dwellings, the lowest average daily cost for a county is 7½d. and the highest is 1s. 2¼d., or £11 8s. 1½d. and £21 13s. 5¼d. per annum.

Rates of Board in Establishments.

Table XXVII. (Appendix A) shows the present rates of board for pauper lunatics in each of the various classes of establishments, and the minimum rates for private patients in Royal and District Asylums.

From this Table it appears that the minimum rates of board at which pauper patients are received in the Royal or Chartered Asylums range from £24 per annum in the Crichton Royal Institution, to £33 4s. in the Edinburgh Royal Asylum. In District Asylums the rates for patients belonging to the respective districts range from £21 5s. 10d. in the Banff Asylum to £31 4s. in the Glasgow District Asylums of Gartloch and Woodilee. In Parochial Asylums the estimated cost for the pauper lunatics of the parishes to which these establishments severally belong varies from £24 19s. 5d., which is the estimated cost in the Greenock Parochial Asylum, to £28 13s. 1d., which is the estimated cost in the Paisley Parochial Asylum at Craw Road.

The rates of District Asylums may be regarded as showing in these establishments the actual cost of the maintenance of patients as distinguished from the cost of their lodging. It is proper, therefore, when comparing these rates with those in Royal and Parochial Asylums, to keep in view that the expense of erecting and fitting up is in District Asylums defrayed out of county assessments; whereas in the case of Royal Asylums it is defrayed either out of endowments, or out of the profits derived from keeping private patients, or out of the board charged for paupers; and in the case of Parochial Asylums, *i.e.*, lunatic wards of poorhouses with unrestricted licences, it is defrayed out of the poor-rate, and is now taken more or less into account in the estimated cost given in the Table. In the rates given as representing the cost in the lunatic wards of poorhouses, which range from £15 15s. 3d. in the Buchan Poorhouse to £24 16s. 2d. in the Govan and Perth Poor-

houses, the cost of the buildings is also to some extent taken into account. Expenditure for Maintenance of Pauper Lunatics.

The great differences in the estimated cost of patients shown in some instances between one establishment of the same class and another, in the case of Lunatic Wards of Poorhouses, are not accounted for by differences in these establishments in regard to dietary or accommodation.

Table XXVIII. shows the expenditure by District Boards of Lunacy during the financial year 1903–1904, on lands, buildings, and furnishings of District Asylums, and other expenses connected therewith.* It refers entirely to expenditure on pauper lunatics paid out of county assessments, as distinguished from the expenditure which is met by poor-rates levied on parishes. Cost of Providing District Asylum Accommodation.

Column 11 of the Table shows that the net outlay on District Asylums during the year 1903–1904 for land, buildings, and furnishings, &c., was £416,101.

Column 12 of the Table shows that the amount of money borrowed by District Lunacy Boards on the security of assessments, to provide land and buildings, and remaining unpaid at 15th May 1904, was £1,591,373; and Columns 13 and 14 show that the total assessments on lunacy districts to provide the interest on sums borrowed, to repay instalments of principal, and to repair and maintain buildings, &c., amounted for the year ending 15th May 1904 to £140,334, of which £64,153 was applied to reduction of debt.

Table XXIX. shows in detail the expenditure on the maintenance and management of pauper lunatics in each District Asylum during the financial year 1903–1904, and the net cost at which the patients of each asylum are maintained. The average cost of maintenance and management per patient for the year 1903–1904 is £27 13s. 7d., and after a deduction of farm profits, &c., the average net cost is £27 2s. 4d.,† which shows an increase in the net cost of £1 6s. 8d. per patient as compared with the previous year. The expenditure under such heads of these Tables as embrace articles produced by asylum farms and gardens is liable to be more or less affected by varying estimates of value, but as an over or under estimate of the value of farm produce would only have the ultimate effect of increasing or diminishing the apparent profit on the farm account, they cannot affect the 'net maintenance expenses,' which are stated under deduction of farm profits. The following statement shows the total expenses per patient, as shown by the Table, in all District Asylums for the year 1903-1904, and the expenses under the six heads specified. Cost of Maintenance of Patients in District Asylums.

* See pages li-lviii of this Report.

† These calculations, and those in the following Table, are made upon the average numbers of patients actually resident.

[TABLE.

Expenditure for Maintenance of Pauper Lunatics.

No.	Year 1903–1904. District Asylum.	Food.	Tobacco (per male patient).	Wines, Spirits, and Malt Liquors.	Clothing, Boots and Shoes.	Salaries and Wages.	All other Expenses.	Total Maintenance Expenses, without deduction of profit on Farm &c.*
		£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1	Argyll,	11 11 8	0 11 11	0 0 9	1 4 1	7 9 9	4 18 8	25 10 6
2	Ayr,	11 1 3	0 11 3	0 0 11	1 19 4	7 8 8	6 17 2	27 13 0
3	Banff,	10 10 5	0 8 3	0 3 2	1 11 11	5 19 7	5 16 10	24 5 10
4	Elgin,	9 9 7	0 13 9	0 4 9	1 10 11	5 14 9	5 6 3	22 12 4
5	Fife,	10 15 4	0 9 10	0 1 11	2 8 3	6 12 11	7 4 4	27 7 7
6	Glasgow (Gartloch),	12 12 0	0 9 6	0 1 3	2 0 10	9 4 6	8 19 0	33 2 6
7	Glasgow (Woodilee),	11 15 8	0 10 4	0 1 2	1 19 1	9 5 11	6 14 3	30 1 4
8	Govan,	10 7 8	0 11 2	0 1 4	2 3 8	9 2 8	8 4 2	30 6 0
9	Haddington,	10 9 3	0 18 7	0 4 10	1 11 2	6 2 1	5 4 7	24 0 0
10	Inverness,	11 18 7	0 14 0	0 4 4	1 16 7	7 3 11	6 3 10	27 13 5
11	Kirklands,	10 0 3	0 9 9	0 7 2	1 13 8	7 8 7	5 15 3	25 9 10
12	Lanark,	9 1 0	0 8 7	0 1 4	1 12 3	6 16 1	4 14 2	22 9 2
13	Midlothian,	10 10 1	0 7 10	0 2 2	2 0 3	8 0 5	9 10 5	30 7 1
14	Perth,	10 18 2	0 8 1	0 2 6	1 9 9	7 9 6	6 5 2	26 8 10
15	Roxburgh,	11 10 0	0 10 6	0 2 8	2 1 9	8 5 1	7 18 3	30 2 5
16	Stirling,	10 17 2	0 11 6	0 2 0	2 3 2	7 12 10	7 10 0	28 11 3
	Average,	10 19 0	0 10 7	0 2 1	1 17 9	7 14 11	6 15 6	27 13 7

This statement shows that in the year 1903–1904 the highest expenditure under the head of Food was £12 12s. per patient, in the Gartloch Asylum; and the lowest £9 1s., in Lanark Asylum, which is £1 18s. below the average of all District Asylums.

Expenditure on Maintenance of Patients in District Asylums during past twenty years.

The following statement shows the expenditure per patient in District Asylums during each of the twenty-one years for which the information is obtainable under the same heads as those given in the previous statement:—

Years.	Food.	Tobacco (per Male patient).	Wines, Spirits, and Malt Liquors.	Clothing, Boots and Shoes.	Salaries and Wages.	All other Expenses.	Total Maintenance Expenses, without deduction of Profit on Farm, &c.*
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1883–84	11 15 0	0 9 3	0 5 7	1 14 5	6 4 0	5 1 4	25 4 8
1884–85	11 12 0	0 9 8	0 5 2	2 0 4	6 8 0	5 5 8	25 15 9
1885–86	11 6 0	0 9 8	0 5 4	1 17 2	6 9 0	5 14 10	25 17 1
1886–87	10 14 4	0 10 0	0 5 6	1 17 0	6 12 0	5 10 6	25 4 3
1887–88	10 4 6	0 9 3	0 5 9	1 17 2	6 9 2	5 9 2	24 10 3
1888–89	10 4 3	0 9 3	0 6 9	1 19 3	6 9 4	5 11 9	24 16 0
1889–90	10 9 7	0 9 3	0 6 5	1 19 11	6 9 8	6 1 2	25 11 4
1890–91	10 8 7	0 9 3	0 6 2	1 16 9	6 5 0	5 14 2	24 15 2
1891–92	10 11 1	0 9 5	0 6 3	1 17 2	6 4 4	5 15 4	24 18 11
1892–93	10 7 1	0 9 7	0 5 4	1 15 8	6 4 0	5 19 5	24 16 3
1893–94	9 16 10	0 9 1	0 4 2	1 12 5	6 3 0	5 10 10	23 11 9
1894–95	9 14 6	0 9 6	0 4 6	1 15 1	6 6 5	5 15 8	24 0 11
1895–96	9 16 1	0 10 3	0 4 8	1 16 2	6 12 3	5 8 9	24 2 10
1896–97	9 11 2	0 10 1	0 4 1	1 16 3	6 11 8	5 17 1	24 5 2
1897–98	10 4 4	0 10 2	0 4 2	2 5 8	6 19 6	5 16 1	25 14 11
1898–99	10 6 2	0 10 2	0 4 1	1 15 2	7 1 9	6 4 2	25 18 6
1899–1900	10 4 10	0 10 2	0 3 10	1 15 10	7 1 11	6 7 8	25 19 0
1900–1901	10 13 4	0 10 10	0 3 2	1 17 1	7 4 1	7 9 11	27 12 10
1901–1902	10 13 1	0 11 2	0 2 9	1 15 6	7 6 2	6 11 11	26 14 10
1902–1903	10 13 9	0 10 8	0 2 7	1 17 11	7 7 4	6 9 3	26 16 2
1903–1904	10 19 0	0 10 7	0 2 1	1 17 9	7 14 11	6 15 6	27 13 7

* The difference between the sum shown in the last column, and that shown by the addition of the figures in the columns preceding it, arises from the fact that the 'Total Maintenance Expenses' are calculated upon the total number of patients resident, while in the case of the column headed 'Tobacco,' the cost is calculated on the number of male patients only.

Expenditure for Maintenance of Pauper Lunatics.

The expenditure naturally fluctuates somewhat from year to year, but on the whole it will be seen that the gross expenditure fell gradually until the year 1893–94, since which there has been an almost steady increase. Comparing the first year included in the Table with the last, it will be seen that a decrease has occurred under the head 'Food,' and that the main rise has occurred under 'Salaries and Wages' and unclassified expenses.

Quantities and Values of Articles consumed in District Asylums.

Table XXX. shows the quantity per inmate (including patients and officers and servants partially or wholly boarded) of each article of consumption in regard to which we have separate figures, supplied to each asylum during the year 1903–1904; and also the price at which each article has been supplied, whether by purchase or from the asylum lands, the price in the latter case being an estimate. The quantities given are derived from the weight or measure assigned to each article by the voucher which accompanied its delivery at the store.

Quantities and Values of Articles supplied by Farms and Gardens of District Asylums.

Table XXXI. shows the quantity of each article supplied to District Asylum stores from each asylum farm and garden, and the prices at which the various articles have been estimated.

Farm and Garden Accounts of District Asylums.

Table XXXII. shows under various heads the receipts during the year 1903–1904 of District Asylum farms and gardens from produce sold or supplied to the asylum, the expenses in detail during these years, and the profit on each year's transactions.

In comparing the various amounts of profits shown, it is necessary to take into consideration the different estimates of the value of the produce supplied to the asylums.

VIII. DANGEROUS LUNATICS.

Dangerous Lunatics.

The following Statement shows the number of persons sent to asylums as dangerous lunatics, in each of the ten years 1895–1904, at the instance of the Procurator-Fiscal, under the provisions of the 15th Section of 25 & 26 Vict. cap. 54:—

1895,	13	1900,	1
1896,	10	1901,	5
1897,	13	1902,	7
1898,	5	1903,	12
1899,	8	1904,	8

The figures in this statement do not disclose the extent to which the provisions of the Section dealing with dangerous lunatics are taken advantage of. In the majority of cases in which proceedings are begun under that Section, an undertaking is given at an early stage of the procedure, by an Inspector of Poor or some person interested, that arrangements will be made for the safe custody of the lunatic which will be satisfactory to the Sheriff. In these cases an engagement that the patient will be placed in an asylum on a Sheriff's order, obtained in the ordinary way, is usually regarded by the Sheriff as 'an arrangement to

Dangerous Lunatics.

his satisfaction,' and no further procedure under the Section takes place. The patient remains in the asylum as an ordinary patient to whom the statutory provisions relating to persons confined as 'dangerous lunatics' do not apply. This procedure saves unnecessary expenditure and prevents the creation of obstacles to the discharge of patients in many cases which from their nature require no greater precautions than are called for in regard to the discharge of all unrecovered patients. The insanity of persons against whom proceedings are instituted as 'dangerous lunatics' does not usually differ from the insanity of persons committed to asylums in the ordinary way. They fall into the hands of the police frequently under circumstances such as might occur in the case of almost any lunatic who is friendless, or has become suddenly insane, or whose case does not happen to have been brought under the notice of parochial authorities. In many cases with which the police are called on to deal, and where no serious act has been committed, the patient is simply handed over to the care of the parochial authorities or of his friends, and no procedure whatever is taken under the Section in question. In other cases the circumstances are such as to make it desirable that the preliminary steps prescribed by the Section dealing with dangerous lunatics should be instituted, so as to give the Sheriff an opportunity of judging as to whether the lunatic should be confined as a dangerous lunatic or not, and in a few of these cases it is found to be of advantage for the public safety that the Sheriff should commit the lunatic in such a way that, unless he recovers his sanity, he cannot be discharged without consent of the Procurator-Fiscal. We have had no reason to think that the statutory provisions in regard to dangerous lunatics do not secure the safety of the public as far as is practicable.

IX. ALIEN LUNATICS.

Alien Lunatics.

During 1904, 36 pauper lunatics were removed from Scotland, from having no settlement in that country. Of these patients, all of whom were removed from asylums, 9 were sent to England and 27 to Ireland.

X. LUNATICS UNDER JUDICIAL FACTORS.

Lunatics under Judicial Factors.

At the end of December 1904 there were 1017 persons reported to us by the Accountant of the Court of Session as under Judicial Factory in consequence of mental unfitness for the management of their affairs. This number is exclusive of some of the cases in which the means of the wards have been exhausted, though the Factory has not been formally discharged by the Court.

These persons were disposed of in the following way :—

653 were in asylums in Scotland;
305 were in private dwellings in Scotland; and
59 were resident either in asylums or private dwellings beyond the direct jurisdiction of the Board.

Lunatics under Judicial Factors.

Of the 59 who were beyond the direct jurisdiction of the Board, 25 were in asylums in England, 22 were in private dwellings in England, and 1 in an asylum in Ireland. Of the remainder, 2 were resident in Australia, 1 in Canada, 1 in the United States of America, 1 in Germany, 1 in Belgium, 1 in Ceylon, 3 in New Zealand, and 1 in India.

All patients resident in Scotland whose estates are under the management of Judicial Factors were visited by our officers during the year, except some whose position and circumstances were otherwise satisfactorily known, and in whose cases visitation was thought undesirable.

XI. THE STATISTICS OF LUNACY FROM 1858 TO 1905.

The Statistics of Lunacy from 1858 to 1905.

QUINQUENNIAL RETROSPECT.

Quinquennial Retrospect.

General Results.

In Table I. of Appendix A we give the number of private and pauper lunatics of whom we had official cognisance, exclusive of the inmates of the Lunatic Department of H.M. General Prison, and of Training Schools for Imbecile Children, at 1st January 1858, the average number in each quinquenniad from 1861 to 1885, and the number at 1st January of each subsequent year up to the present time, distinguishing the numbers of each category accommodated in establishments and in private dwellings, and also distinguishing between the sexes.

Increase of Number since 1858.

Table II. of Appendix A shows that from 1st January 1858, when we entered on our functions, to 1st January 1905, the total number of lunatics officially known to the Board including the inmates of the Lunatic Department of H.M. General Prison, and also the inmates of Training Schools for Imbecile Children, has increased from 5824 to 17,241, showing an increase of 11,417, which was distributed as follows:—

	Increase since 1858.
1. Private Patients:—	
a. Resident in Establishments, . .	1,242
b. Resident in Private Dwellings, . .	105
2. Pauper Patients:—	
a. Resident in Establishments, . .	8,747
b. Resident in Private Dwellings, . .	920
Total, . .	11,014
Increase of number in Training Schools, and the Lunatic Department of the General Prison, ...	403
Total Increase, ...	11,417

Changes in Mode of Distribution.

Table II. further shows the mode in which lunatics of all classes were provided for on the 1st January 1858, and the mode in which they have been provided for since that time. The follow-

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ing statement shows the numbers provided for in the various ways at the beginning and at the end of the whole period:—

	At 1st January 1858.	At 1st January 1905.	Increase since 1858.	Decrease since 1858.	Net Increase.
In Royal Asylums, . . .	2,380	3,784	1,404	...	...
,, District Asylums, . . .	...	8,580	8,580	...	...
,, Private Asylums, . . .	745	123	...	622	...
,, Parochial Asylums . . .	576	520	...	56	...
,, Lunatic Wards of Poorhouses, .	264	947	683	...	...
,, Private Dwellings, . . .	1,804	2,829	1,025	...	...
,, H.M. General Prison, . .	26	50	24	...	...
,, Training Schools, . . .	29	408	379	...	...
Total Increase or Decrease,	5,824	17,241	12,095	678	11,417

Proportion of Private and Pauper Patients to Population.

The following tabular statement shows for each quinquennial period from 1880 to 1904 the average annual number of private and of pauper patients resident in establishments and in private dwellings, in proportion to population:—

Quinquennaids.	Proportions per 100,000 of Population of								
	Private Lunatics Resident in			Pauper Lunatics Resident in			Private and Pauper Lunatics Resident in		
	Establishments.	Private Dwellings.	Total.	Establishments.	Private Dwellings.	Total.	Establishments.	Private Dwellings.	Total.
1880–84	38	3	41	187	45	232	225	48	273
1885–89	40	3	43	192	58	250	232	61	293
1890–94	43	3	46	208	63	271	251	66	317
1895–99	47	3	50	228	63	291	275	66	341
1900–04	48	3	51	250	59	309	298	62	360

It will be seen from this statement that the number of private patients resident in establishments has increased by ten per 100,000 of population during the period dealt with. Taking the population as 4,600,000 at the end of the period, this represents an increase of 460 beyond what can be accounted for by increase of population. The proportion of private patients provided for in private dwellings has remained unchanged throughout the period. In the case of pauper patients the increase has been 63 per 100,000 in establishments, and 14 in private dwellings, which represents an increase of 2898 pauper lunatics resident in establishments, and 840 in private dwellings, over and above the increase which can be accounted for

as due to an increased population. The number of private patients consists in part of patients from England and Ireland. We ascertained in 1901 that these patients then numbered 370, but their number has probably not increased materially as between the earliest quinquenniad in the foregoing statement and the latest.

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Increase in the Number of Pauper Lunatics in Asylums.

The increase with which our statistics have mainly to deal is the increase in the number of pauper lunatics provided for in establishments, and the following Table I. has been prepared with the object of showing to what extent and in what parts of the country the increase occurred, and of throwing some light upon ways in which the increase has been caused. The manner of grouping of counties and of presenting the statistics is substantially the same as that followed in our 42nd Report, but the calculations for the quinquenniad 1900-4 have, where necessary, been readjusted in light of the more accurate estimates of population founded upon the Census of 1901.

Absolute Increase in the Number of Pauper Lunatics Resident in Asylums.

A comparison of figures referring to a time when asylum accommodation was wholly wanting in many areas of Scotland, and was deficient in all, with later periods, when the intentions of the Act of 1857 for the provision of adequate accommodation had received effect, would be misleading if the object of the comparison were more than to show the increased weight of the burden which lunacy entails upon the country. The figures in Table I., which follows, have been confined, therefore, to the past twenty-five years, a period which goes back to a time when Scotland had been fairly well provided with asylum accommodation, and also subsequent by some years to the giving of the Pauper Lunatic Grant. In the Tables given, the counties of Scotland have been grouped into four divisions, namely, (1) Northern and Highland, (2) Eastern, (2) Central, and (4) Southern, and the counties within these divisions have been further grouped together whenever a group formed a lunacy district of itself, or when the circumstances of neighbouring counties were so similar as to render a separate consideration of the figures relating to them unnecessary. The only case in which the figures relating to two lunacy districts, each possessed of a district asylum, have been conjoined is that of Banff and Elgin, the smallness of their populations and the similarity of their circumstances making it convenient to deal with them conjointly. Some counties, however, such as Lanark and Edinburgh, contain within themselves more than one Lunacy District.

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It will be seen from the totals of Section 1 of the Table that during the twenty-five years dealt with the number of pauper lunatics in Scotland resident in establishments has risen from an average in the first quinquenniad of 6,998 to an average in the fifth of 11,196, that is, by 4198. The rise between the fourth and fifth quinquenniads alone has been 1507. All divisions of the country have contributed to the rise, which for Scotland as a whole shows an increase in the period dealt with of 60 per cent. In the Central division, with its rapidly increasing population, the rise shown is 79 per cent.

Increase in Proportion to Population of Pauper Lunatics Resident in Establishments.

It is, however, only possible to consider the nature of the changes which have occurred, and the existing extent and distribution of pauper lunacy, in their relation to population, as shown in Section 2 of the Table. From this section it will be observed that the average number of pauper lunatics in all Scotland per 100,000 of population was in the last quinquenniad 250. In the Central division, with a rising population, this proportion was 225; in the Southern, with a falling population, 254; in the Eastern, with a rising population, 279; and in the Highland and Northern, with a falling population, 333. In this last group the highest point is reached by Argyll and Bute with 434, and in the Central division the lowest point is touched by the Stirling group with 195, and Renfrewshire with 197. On the other hand, the County of Haddington in this group shows a proportion of 380, which is only surpassed by Argyll and Bute. Haddington, which showed an abnormally large proportion at the beginning of the period dealt with (255 to 187 for all Scotland), closes the period with the largest increase in proportion to population (125) of any county or group shown in the Table.

Rise in Number Resident during last Quinquenniad.

During the last five years alone Scotland as a whole shows an increase of pauper lunatics in establishments in proportion to population of 22. In the second quinquenniad the increase was 5, in the third 16, and in the fourth 20. A like progressive increase is shown in each division, except the Northern and Highland, where the increased proportion stands in the last quinquenniad at 29, as it was in the quinquenniad preceding. The largest increases in proportion to population during the last quinquenniad are shown in the Inverness group 51, in the Roxburgh group 51, in Edinburgh 49, and in Aberdeen 41; the smallest increases are shown in the Stirling group 1, in Ayr 1, in Renfrew 5, and in the Dumfries group 5. At the close of the twenty-five years under review, the proportion of pauper lunatics in establishments to population shows an increase over what it was at the beginning, amounting in the Northern and Highland division to 47 per cent., in the Eastern to 28 per cent., in the Central to 35 per cent., in the Southern to 41 per cent., and in all Scotland to 34 per cent. Otherwise stated, for all Scotland, while in 1880–84 there was of patients in establishments one pauper lunatic to 534 persons, there was in the quinquenniad just ended one to every 399 persons.

Scope of Retrospect.

The object of this retrospect is to call attention to some obvious factors in the production of that result rather than to answer questions as to why there should be more pauper lunacy in one part of the country than in another, or whether there is an

Population.		Counties or Groups of Counties.	Section 1. Actual Average Annual Number of Pauper Lunatics Resident in Establishments. (a) 1880–84	(b) 1885–89	(c) 1890–94	(d) 1895–99	(e) 1900–04	Increase between 1st and 5th Quinquenniads.	Increase between 4th and 5th Quinquenniads.	Section 2.* Proportion of Pauper Lunatics Resident in Establishments per 100,000 of Population. (a) 1880–84	(b) 1885–89	(c) 1890–94	(d) 1895–99	(e) 1900–04	Increase between 1st and 5th Quinquenniads.	Increase between 4th and 5th Quinquenniads.
		Northern and Highland—														
Falling	1881 100,614 1901 90,735	Shetland, Orkney, Caithness,	154	171	215	239	251	97	12	153	173	223	256	277	124	21
Falling	1881 202,384 1901 197,285	Sutherland, Ross, Inverness, Nairn,	433	470	489	530	628	195	98	214	234	245	267	318	104	51
Falling	1881 129,007 1901 123,283	Perth,	297	321	346	381	399	102	18	231	255	283	311	324	93	13
Falling	1881 94,125 1901 92,429	Argyll, Bute,	305	328	355	394	401	96	7	324	351	384	426	434	110	8
Falling	1881 526,130 1901 503,732		1,189	1,290	1,405	1,544	1,679	490	135	226	249	275	304	333	107	29
		Eastern—														
Falling	1881 106,966 1901 106,288	Elgin, Banff,	227	260	277	295	315	88	20	212	245	264	279	296	84	17
Rising	1881 267,990 1901 313,825	Aberdeen,	574	601	650	741	904	330	163	214	217	226	247	288	74	41
Rising	1881 300,824 1901 315,619	Forfar, Kincardine,	728	712	795	884	919	191	35	242	233	256	282	291	49	9
Rising	1881 178,628 1901 225,821	Fife, Kinross,	331	371	432	491	542	211	51	186	198	219	232	240	54	8
Rising	1881 854,408 1901 961,553		1,860	1,944	2,154	2,411	2,680	820	269	218	222	240	259	279	61	20
		Central—														
Rising	1881 38,502 1901 38,665	Haddington,	98	110	128	141	147	49	6	255	291	343	370	380	125	10
Rising	1881 402,986 1901 503,127	Edinburgh, Peebles,	749	757	773	870	1,166	417	296	186	178	172	183	232	46	49
Rising	1881 256,996 1901 354,628	Stirling, Linlithgow, Clackmannan, Dumbarton,	422	437	511	636	690	268	54	164	156	169	194	195	31	1
Rising	1881 904,412 1901 1,314,810	Lanark,	1,442	1,670	1,966	2,404	3,011	1,569	607	159	167	180	200	229	70	29
Rising	1881 263,374 1901 293,497	Renfrew,	370	384	417	518	579	209	61	140	151	170	192	197	57	5
Rising	1881 217,519 1901 254,468	Ayr,	380	409	485	577	614	234	37	175	184	214	240	241	66	1
Rising	1881 2,083,759 1901 2,759,195		3,461	3,767	4,280	5,146	6,207	2,746	1,061	166	170	182	201	225	59	24
		Southern—														
Falling	1881 114,398 1901 102,984	Roxburgh, Berwick, Selkirk,	201	191	213	256	297	96	41	176	168	189	237	288	112	51
Falling	1881 156,878 1901 144,639	Dumfries, Kirkcudbright, Wigtown,	287	274	306	332	333	46	1	183	178	204	225	230	47	5
Falling	1881 271,276 1901 247,623		488	465	519	588	630	142	42	180	174	197	230	254	74	24
Rising	1881 3,735,573 1901 4,472,103	**SCOTLAND,**	6,998	7,466	8,358	9,689	11,196	4,198	1,507	187	192	208	228	250	63	22

* The proportions given under Sections 2 and 3 differ from those given in Table XII. of Appendix A, owing to the fact that the number in that Table of Pauper Lunatics

Section 3.* Proportion of Pauper Lunatics Admitted Yearly to Establishments per 100,000 of Population.					Increase or Decrease between 1st and 5th Quinquenniads.	Increase or Decrease between 4th and 5th Quinquenniads.	Section 4. Total Number of Pauper Lunatics Discharged from Establishments during each Quinquenniad per cent. of the Average Number Resident during each Period.					Increase or Decrease between 1st and 5th Quinquenniads.	Increase or Decrease between 4th and 5th Quinquenniads.	Section 5. Total Number of Pauper Lunatics who Died in Establishments during each Quinquenniad per cent. of the Average Number Resident during each Period.					Average of Quinquenniads (a), (b), and (c).	Average of Quinquenniads (d) and (e).
(a) 1880–84	(b) 1885–89	(c) 1890–94	(d) 1895–99	(e) 1900–04			(a) 1880–84	(b) 1885–89	(c) 1890–94	(d) 1895–99	(e) 1900–04			(a) 1880–84	(b) 1885–89	(c) 1890–94	(d) 1895–99	(e) 1900–04		
40	41	49	43	49	+9	+6	73	78	54	53	45	−28	−8	45	36	36	39	47	39	43
53	59	67	79	76	+23	−3	77	84	104	98	81	+4	−17	42	35	42	34	33	40	33
56	57	59	76	69	+13	−7	82	64	59	78	63	−19	−15	38	35	37	30	44	37	37
75	72	75	74	63	−12	−11	72	69	61	46	44	−28	−2	32	30	27	35	28	30	31
55	57	63	71	67	+12	−4	76	74	75	73	62	−14	−11	39	34	36	34	37	36	35
48	48	65	70	65	+17	−5	70	63	79	87	67	−3	−20	33	31	33	43	41	32	42
50	43	50	55	65	+15	+10	70	62	65	66	59	−11	−7	35	33	38	32	32	35	32
59	55	67	73	68	+9	−5	68	79	74	76	72	+4	4	41	41	41	46	50	41	48
46	43	49	55	52	+6	−3	88	63	66	66	65	−23	−1	36	39	36	37	38	37	37
52	48	57	63	63	+11	...	72	69	71	72	66	−6	−6	37	37	38	40	40	37	40
66	56	84	79	78	+12	−1	73	61	78	52	50	−23	−2	26	36	35	48	39	32	43
68	64	72	71	77	+9	+6	123	122	140	118	84	−39	−34	48	50	62	53	55	53	54
50	46	50	58	62	+12	+4	105	97	86	88	92	−13	+4	41	46	43	45	63	43	54
64	60	62	65	74	+10	+9	138	118	110	93	93	−45	...	43	42	46	44	48	44	46
50	54	70	74	65	+15	−9	126	130	146	124	107	−19	−17	38	46	48	49	51	44	50
50	52	58	64	52	+2	−12	97	98	73	75	62	−35	−13	37	35	43	45	46	38	45
60	58	64	66	70	+10	+4	123	114	111	96	89	−34	−7	42	43	48	47	51	44	49
42	40	46	57	55	+13	−2	84	78	82	67	50	−34	−17	36	32	29	36	36	32	36
42	44	46	45	47	+5	+2	98	74	62	61	64	−34	+3	44	36	44	38	35	41	36
42	42	46	50	50	+8	...	92	76	70	64	57	−35	−7	40	35	38	37	36	38	36
56	54	60	65	67	+11	+2	99	93	92	85	77	−22	−8	40	40	43	42	45	41	43

"sent to Asylums" excludes the number of Pauper Lunatics already registered when "transferred from private dwellings to asylums," given in Table XIII. of Appendix A.

increase of insanity in the community at all. Consideration of the former question involves matters which are beyond the scope of this retrospect and which have been dealt with in previous Reports, such as the influences exerted upon lunacy statistics by rising or falling populations in special localities due to the migration of adult persons from one part of the country to another, the distribution of wealth, accessibility of asylums, etc.; and, on the other hand, no answer can be given to the question as to whether insanity is increasing in the community without an effort to estimate the effect upon the growth of the numbers in asylums of the fact that asylums are being more and more regarded as general hospitals—as receptacles for those who are dying, those who have failed mentally through age, those who, owing to their mental state, are industrially useless or fail to fit into the ways of domestic life, and those who under former conditions would have been left at home or would have found their way to the ordinary wards of the poorhouse or to prison. It is not the purpose of this enquiry to make such an estimate or to deal with the different degrees of pauper lunacy shown in different parts of the country further than to call attention to certain local circumstances which probably affect the figures. Questions arising out of depletion or increase of population do not affect the country as a whole, as the population is undergoing a natural increase, and there is no evidence of any unusual stream of emigration from Scotland during the period under review.

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The considerable and progressive growth in the number of pauper lunatics resident in establishments in proportion to population, which is shown to have taken place during the period embraced by the Table, can only have arisen in one or two or all of three ways, namely, by (*a*) an increased number of admissions; (*b*) by a decreased number of discharges; or (*c*) by a decreased death-rate. We propose to examime the remaining figures of the Table to ascertain what influence each of these factors, taking them in the order named, may have had on the result.

How Increased Number Resident has been brought about.

Proportion to Population of Admissions of Pauper Patients to Establishments.

It will be seen from Section 3 of the Table that, comparing the earliest quinquenniad with the latest, there has been a rise of 11, per 100,000 of population, in the number of pauper lunatics admitted, which is equal to the admission each year during the last quinquenniad of 506 in excess of what can be accounted for by increase of population. This proportion of increase is distributed with fair equality throughout each division of the country, the Southern showing an increase of 8, the Central of 10, the Eastern of 11, and the Northern and Highland of 12. The increase is also distributed with fair equality among the various groups or counties forming each division, except that in the Inverness group of counties an admission rate has occurred during the last two quinquenniads beyond the average of its division, or indeed of any division of the country. The results recorded in recent Reports of examinations into the pauper lunacy statistics of certain parishes in the Western

Considerable Rise in Admissions between Earliest and Latest Quinquenniads, in Proportion to Population.

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Isles belonging to this division showed that the great growth in the number of pauper lunatics sent to the asylum from these parishes was, beyond doubt, not due to an increase of insanity in the community, but merely to the admission to the poor-roll, followed sooner or later by removal to the asylum, of insane persons resident in the community who had hitherto not been officially recognised as insane. A similarly excessive admission rate occurred in Argyll and Bute throughout the first four quinquenniads included in the Table, but the last quinquenniad shows, in these counties, an average yearly fall of 12 in proportion to the population, as compared with the earliest quinquenniad. This is the only fall in the admission rate recorded in the Table as between the earliest quinquenniad and the latest.

Rise in Latest Quinquenniads slight and confined to a few Counties.

If, however, we compare the latest quinquenniad with that immediately preceding, the results are more encouraging. Of the sixteen groups or counties dealt with separately in the Table, a fall has taken place during the past four years in ten and a rise in six. In the Southern and in the Eastern divisions as a whole no change has occurred in the annual admission rate during the past five years. In the Northern and Highland division there is a fall recorded of 4 per 100,000 of population, and in the populous Central division only has a rise occurred of 4 per 100,000 of population. Two members of this division, Renfrew and Ayr, show a marked fall, the rise shown having occurred mainly in Lanarkshire and Edinburgh. All the members of the Eastern division, except Aberdeenshire, show a fall, and also all the members of the Northern and Highland division, except the most northerly group, from which, however, the number sent to asylums is still exceptionally low.

Rise in Resident Rates where Admission Rates are Falling.

The total rise of 2 shown for all Scotland represents an annual admission of about 89 patients yearly during the last quinquenniad in excess of what can be accounted for by the growth of population. But, as has already been pointed out, the admission rate during that period in the Northern and Highland group has fallen, on an average, by 4 yearly per 100,000 of population, representing an actual yearly fall of 20 patients, or 100 in the five years; while as will be seen from Section 2, the number in that division resident in asylums increased by 29 per 100,000 of population during the same quinquenniad, representing an increase of 145 patients. In the Eastern division, in which the admission rate was stationary, an increase took place in the number resident of 20 in proportion to population, equal to about 130 patients. In the Southern division, also stationary during the past five years as regards the admission rate, an increase occurred in the proportion of pauper patients resident to population of 24, which is equivalent to about 59 patients. The populous Central division shows an increased admission rate during the past five years of 4 per 100,000, representing about 552 patients, while the increased proportion to population in the number resident during the same period represents about 662 patients. Of individual counties or groups, the Roxburgh group, with a somewhat lowered admission rate in proportion to population during the last quinquenniad, shows the remarkable rise of 51 in the number resident in proportion

to population during that period; Renfrew and Ayr, with markedly lowered admission rates (the decrease in Ayr representing about 150 patients in the five years), both show a somewhat increased proportion resident during the period. In Edinburgh the admission rate shows a rise during the past five years of about 151 in excess of what can be accounted for by the increase of population, while the like increase in the proportion of pauper patients resident is equal to an increase of 246 patients. Elgin and Banff, with a falling rate of admission, shows a considerable rise in the proportion resident for such small counties. Argyll and Bute, Perth, and the Inverness group, with decreased rates of admission, show an increase in the proportion resident, the increase in the group last named being equal to 100 patients.

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Rate of Discharge of Pauper Patients.

An examination of Section 4 of the Table giving the proportion of patients discharged to the numbers resident shows where an explanation is to be found of why an increase in the resident number is continued into a period of five years, showing in most cases a stationary or falling rate of admissions. It will be seen from the totals of Section 4 of the Table that throughout fifteen of the the twenty-five years dealt with there has been a continuous decrease in the rate of discharge, and that this growing tendency to retain patients in asylums shows symptoms of increasing, and has never been so marked as in the two latest quinquenniads, the most marked fall in the discharge rate being shown in the quinquenniad just ended.

Progressive and Increasing Fall in the Rate of Discharge.

Taking the last quinquenniad alone, it is obvious that, in the Inverness group and in Perth, the rise shown in the proportion resident, in spite of a falling admission rate, can only be due to a diminished rate of discharge; and in the case of the latter county, the rise has taken place notwithstanding both a falling admission rate and a marked increase in the number of deaths. To the fall in the rate of discharge is wholly due the rise in the number resident in asylums in the Counties of Elgin and Banff. The large rise in proportion to population in the number of patients resident in asylums and chargeable to parishes in the Counties of Edinburgh and Peebles is, to a great extent, due to the remarkable fall in the rate of discharge during the past five years, a fall equal to nearly 30 per cent. of the number discharged in the preceding five years, which itself showed a falling-off from previous quinquenniads. This may possibly be partly due to spare accommodation having been brought into existence in the Royal Edinburgh Asylum through the provision of accommodation elsewhere, and possibly to the fact that the Edinburgh patients are now scattered among several institutions, in many cases as boarders, and are thus less concentrated than was formerly the case under the parochial eye and under one central medical authority. However this may be, the fall in the number discharged must be held to be very largely answerable for the fact that while in the twenty years from 1880 to 1899 the average number of pauper lunatics resident in asylums was 180 per 100,000 of population, in the five years 1900-4 this proportion

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rose to 232. In the case of asylums in Renfrew and Ayr, the numbers resident, instead of increasing somewhat, should have undergone a material fall, in keeping with the lowered rate of admission. That no fall occurred in these cases is wholly due to the fall in the rate of discharge, which has been progressive throughout the past twenty-five years, and never so marked as in the last five. The Roxburgh group, with a steady death-rate and a somewhat diminished admission rate, shows a remarkably large rise wholly due to the same cause.

The reasons for this great decrease in the rate of discharge from asylums, and the consequent serious burdens imposed upon the ratepayer, notwithstanding a fall in many cases in the rate of patients sent to asylums, is a matter for the most careful consideration and enquiry on the part of the local authorities concerned.

It might be expected that a reason for a decrease in the discharge rate, which is seen to be so general throughout the country and to cover so long a period, might be found in some general and deep-seated cause; but when it is considered how largely the personal element both in asylums and in parishes affects such a matter, and how very differently the various asylums are circumstanced both in regard to the accommodation at their disposal and to the nature of the localities which they serve, it seems more probable that a variety of causes are at work, though possibly some of them may in varying degrees be operative in all asylums.

Possible Causes of Decrease.

Among the causes which may have contributed to the result, the following may be suggested as possible:—(1) An increasing unwillingness to retain insane persons in private life and readiness to take advantage of asylums for their care and nursing, these influences acting conversely in the direction of creating difficulties in the way of discharge; (2) a change in the constituent elements of asylum populations, an increased proportion of them being now unfitted for life out of an asylum; (3) influences at work within asylums themselves which seem to render motives for discharge less and less urgent as asylums grow larger; (4) the lessened inducement to discharge patients, or rather the inducement not to discharge patients, consequent on the creation or possession of an amount of asylum accommodation considerably in excess of immediate requirements; (5) a growing inactivity or indifference on the part of parochial authorities with regard to the removal of unrecovered patients who have ceased to derive benefit from asylum residence, and who could be properly cared for out of an asylum.

Unwillingness to retain Insane Persons in Private Life, or to receive them back from Asylums.

The first of these causes has no doubt operated in the past in increasing the number of admissions to asylums, combined as it has been with a diminished repugnance to asylums and a tendency to regard them merely as a special form of general hospital; and these considerations may still operate in the case of patients from large centres of population, not only in the extended use of asylums as shown in a heightened admission rate, but also in a reluctance to remove patients from asylums back to their homes unless complete recovery can be certified to have taken place.

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This argument as accounting for the diminished rate of discharge loses much of its apparent force in the case of patients derived from populous places, to which it might be supposed to apply most strongly, from the fact that it is, as a rule, from among such patients that the unrecovered have been discharged in the largest numbers. In the majority of cases these were discharged as "relieved," removed from the poor-roll, and returned to the care of friends or to their former employment; while the remainder, unfitted for that mode of disposal, were not returned to the towns from which they came, but were boarded by the parishes to which they belonged in country places where their presence would not be felt to be objectionable. With regard to those derived from the less populous centres, it will be observed from the Table that the public sentiment referred to has not operated, at all events during the past five years, in causing a larger number of persons to be sent to asylums, and therefore it should have operated to no greater extent in local objections to their discharge.

Effect upon Discharge of Admission of Old and Physically Disabled Patients.

In what is implied in the second suggestion, that the decrease in the number discharged may be due to the fact that patients are being admitted in larger numbers at advanced ages, and in a more broken-down physical condition, than was formerly the case, there is doubtless truth. It is in accordance with the view already referred to that asylums are being more and more regarded as general hospitals for physical combined with mental failure, and this view is supported by the fact that an increase in the death-rate has occurred, especially in the three last quinquenniads. But while this may be admitted, evidence is wanting that the actual proportion of the aged has increased to an extent which would at all account adequately for the falling-off in the numbers discharged. We made an enquiry into the ages of the insane in establishments in 1887, the results of which were recorded in our Thirty-first Annual Report. From the Tables there given it appears that the proportion of pauper patients over 65 years of age to the total number at all ages was 10·2 per cent. A similar enquiry made in 1897, and recorded in our Fortieth Annual Report, showed that at that time the proportion of pauper patients in asylums over 65 years of age to the total number at all ages was 10·1 per cent.

No Increase in Proportion of Aged Patients between the Years 1887 and 1897.

It is thus clear that the proportion of aged persons in the population of asylums fell slightly between 1887 and 1897, a period during which it was as constantly and emphatically stated as it now is that the proportion of the aged insane sent to asylums had undergone a large increase. That the physical condition of patients committed from some localities may be worse is possible; but we have no trustworthy evidence to that effect beyond, in some cases, an increased death-rate. It should be noted further that, apart altogether from any alteration in the proportion of physically disabled patients which asylum populations may have undergone, a change has been taking place in the medical view of what kind of treatment is suitable to particular cases, and that many patients are now treated in the hospital wards of asylums who would not have been so treated formerly. The hospital wards of asylums thus form a greatly increased and increasing proportion of the general

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Influences against Discharge operating within Asylums themselves.

accommodation, and it is almost impossible that such a visible change can have occurred without creating an impression, beyond what facts warrant, that a falling-off has occurred generally in the bodily condition of patients received for treatment.

The reason for the third suggestion, that there may be influences within asylums themselves tending with every increase in size to render motives for discharge less and less active, must rest mainly upon the observed facts that growth in size has, except in the case of asylums belonging to single parishes which actively pursue a system of removing patients who have ceased to need asylum care, been invariably attended by a falling-off in the discharge rate, and that in the case of such an asylum as that of Kirklands, where material extensions have not and could not be carried out, the rate of discharge is exceptionally high, and has been maintained at a high figure for a long series of years. In connection with these facts, it cannot be left out of account that there must be a natural desire, which administrators of asylums can be no more exempt from than the administrators of other institutions, to have the control of large rather than of small establishments. This must in many cases exercise a strong though unconscious influence adverse to the reduction of the numbers in asylums, and it may tend to foster the conviction allied to it, and often entertained by excellent superintendents, that they are acting in the matter in the best interests of the community, and that patients once in asylums cannot possibly be so well off elsewhere. The growing size of an asylum also holds out an inducement to retain in it a larger and larger number of useful working patients whose services help to lower the cost of maintaining the establishment; and the growth of numbers must further tend to lessened individual attention being given to the possibilities in each case, through which it may happen that at a critical moment when discharge might be justified, but where the future remains uncertain, nothing is done, and the patient becoming moulded into asylum life is made less and less fitted for ordinary life.

Effect upon Discharge of creating Accommodation much beyond immediate needs.

With regard to the fourth point noted above, there is clear evidence that the erection of a new asylum, or the provision of accommodation much beyond the immediate wants of a Lunacy District, has an important influence in diminishing the rate of discharge. New asylums, erected to accommodate an ultimate number of patients considerably larger than that at first received, appear as very expensive institutions, and there is a natural desire to see the cost per bed reduced by increase of the number accommodated; similarly when a large addition is made to an old asylum a like wish is created to justify its erection by seeing it filled. In this way the ratepayer is apt to suffer in two directions, firstly, in the cost of the buildings erected, and, secondly, in the maintenance of patients to occupy them, who under other circumstances might possibly have been discharged. The strong influence of accommodation upon the discharge rate has been frequently observed in the contrary case, in which the accommodation provided is only sufficient to meet the demand for admission by the vigorous discharge of all patients who can no longer benefit by asylum care. In several such cases, a remarkably high discharge

rate has been maintained for years with great benefit to the ratepayer and without injury to the public or to the patient. In view of these considerations, we have discouraged the provision, whether in new asylums or in additions to old asylums, of more accommodation than is likely to be needed in the immediate future. The question to be met is how to provide accommodation within a short time which shall be sufficient to meet an unavoidable growth of numbers, and which shall yet not involve the bringing into existence of a large amount of accommodation which may remain for a considerable time only partly occupied, and may form a constant inducement to increase the population of an asylum, or at least a constant discouragement to any step which would have the effect of reducing it. This difficulty can be met, we believe, in an entirely satisfactory manner by the erection of separate, and, if desired, almost wholly independent buildings to accommodate from 30 to 50 patients of any class. This system of extension forms a necessary feature in new asylums erected on the seggregate or village plan, but it is no less capable of adoption in the case of asylums of the old pavilion or block type. It has now been adopted by several of the older asylums in Scotland, and experience has repeatedly shown that such small buildings can be quickly erected, that their cost need not exceed £100 per bed, and that so far as the care and comfort and classification of the patients are concerned they answer their purpose admirably.

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With regard to the fifth possible cause of the decreasing number of patients discharged—the lessened activity or growing supineness of parochial authorities towards the question of removing patients who have ceased to benefit by or to need asylum care—the figures shown in the Table may be held to speak for themselves. Many of the considerations above discussed may, however, have contributed to the result, some in the case of one district, others in the case of other districts, and parochial authorities may sometimes have met with discouragement or received little support from asylum authorities in any efforts they may have made to reduce the number of their patients in asylums; but the fact that the numbers resident have risen in face sometimes of a falling admission rate, and always in excess of what the admission rate would justify, is a proof that the parochial authority must, in many cases have at least acquiesced in what has been happening. We have no record that any parish which has earnestly and actively set about the removal of suitable patients from asylums has failed in its efforts, even in the rare case in which encouragement and aid from the asylum authority has been wanting.

Effect upon Discharge of inaction of Parochial Authorities.

Death-rate.

It will be seen from Section 5 of the Table that the death-rate in asylums in Scotland has increased somewhat during the twenty-five years under review. Calculating the percentage of the total number of deaths during each quinquenniad to the average number resident during that period, it will be found that in all Scotland the average percentage, which in the first fifteen years of the

Death-rate has risen in some parts of the country.

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period was 41, had risen during the last ten years to 43. The Northern and Highland division, however, records a fall from 36 in the three first quinquenniads to 35 in the two last, and the Southern division shows a like fall from 38 to 36. The Eastern division, on the other hand, shows a rise from 37 to 40, and the Central a rise from 44 to 49. On the whole, the rise in the Eastern and Central divisions supports the belief which has been generally held, and is referred to above, that persons in a condition of mental and physical wreckage, especially from populous industrial centres, are more frequently than was formerly the case practically sent to asylums to die. This rise in the death-rate has, however, it should be noted, not always been accompanied by a rise in the admission rate. On the contrary, it will be observed that it has occurred in many cases in which the last five years have shown a falling admission rate. Among these is Perth, which, with a falling admission rate during the past five years, shows in that period a rise in the death-rate from an average of 35 in the first four quinquenniads to 44 in the last. The Stirling group also, with, however, a somewhat rising admission rate, shows an increase from an average of 44 in the first four quinquenniads to 63 in the last. This rise is so far above previous records in the group, and so far above the death-rate shown by any other group or county in Scotland, as to be remarkable and to call for careful investigation into its possible causes. The increased death-rates as a whole have of course tended to diminish the numbers resident, so that the responsibility for the constant accumulation which has taken place is seen more than ever to rest upon the increasing disinclination or inability to discharge.

Pauper Lunatics in Private Dwellings.

Number in Proportion to Population fallen during last Quinquenniad.

The following Table II., in continuation of a similar Table given in connection with our last quinquennial retrospect in the Forty-second Annual Report, shows the proportion to population of pauper lunatics resident in private dwellings in each quinquenniad from 1880 onwards, also the number admitted to such dwellings in the same periods either by being reported to the Board and provided for at home with their sanction or by being removed from asylums to private care. The proportion of such patients, both resident and admitted, shows a tendency to fall, especially in the quinquenniad just completed. This is what might be looked for in view of the fall in the number of discharges from asylums, because the maintenance of the number of pauper lunatics provided for under private care is mainly dependent upon the degree of vigour exercised in bringing about the removal of unrecovered patients from asylums. All those discharged unrecovered from asylums are not, however, placed as pauper lunatics in private dwellings. The larger proportion of them are, as has been already said, removed altogether from the poor-roll, being either supported by friends, or being found on trial to be able to support themselves. We have had occasion in a former Report,* in writing of the "Discharge of Patients Unrecovered," to call attention to the fact that it is in asylums where the boarding-

* 45th Report, pp. liv–lviii.

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out of patients as pauper lunatics under private care is most assiduously and systematically practised, in which also occurs much the largest proportion of patients discharged unrecovered and at once removed from the poor-roll.

The two Classes of Insane Poor in Private Dwellings.

The insane poor provided for in private dwellings in Scotland consist, broadly speaking, of two classes, namely, those who have never been inmates of asylums, but who on becoming applicants for parochial relief are formally certified and left at home with the sanction of the Board under the care of persons with whom they may have been living in the same mental condition since childhood. The great majority of pauper lunatics of this class belong to the Northern and Highland division of the country. They are, with very few exceptions, under the care of relatives, and much the larger proportion of them are suffering from congenital weak-mindedness. The second class consists of patients who have been removed from asylums and boarded with unrelated guardians. Most of this class belong to large parishes in the Central or Eastern divisions, and the greater proportion consists of persons who have at one time been self-supporting and are suffering from insanity which has first shown itself in adult life. The relative wealth or poverty of counties has a strong influence upon the number of pauper lunatics provided for in private dwellings, as in the poorer counties there is a much larger proportion of persons whose circumstances justify an appeal to the parish for the support, or at all events for a contribution towards the support, of an imbecile child or other relative. In the wealthier counties they either remain in family life without coming on the official register or they are eventually removed to asylums. The number of pauper lunatics provided for under private care may be raised or lowered in any county through mere alteration of methods of administration, and the numbers therefore in themselves form no guide to the prevalence or distribution of lunacy generally. These remarks are necessary to an understanding of the figures in the following Table II., showing in counties or groups of counties the number of pauper lunatics resident in and admitted to private dwellings during the past twenty-five years:—

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TABLE II.

COUNTIES OR GROUPS OF COUNTIES.	Pauper Lunatics in Private Dwellings per 100,000 of Population.										Decrease or Increase between Averages of three first and of two last Quinquenniads.
	Section 1. Average Annual Number of Pauper Lunatics Resident in Private Dwellings per 100,000 of Population.					Section 2. Average Annual Number of Persons per 100,000 of Population who became Pauper Lunatics in Private Dwellings, either by being so disposed of on being certified Insane, or by transference from Establishments.					
	Quinquenniads.					Quinquenniads.					
	1.	2.	3.	4.	5.	1.	2.	3.	4.	5.	
	1880–84.	1885–89.	1890–94.	1895–99.	1900–04.	1880–84.	1885–89.	1890–94.	1895–99.	1900–04.	
Northern and Highland—											
Shetland, Orkney, Caithness,	142	159	178	186	185	18	21	16	18	14	—2
Sutherland, Ross, Inverness, Nairn,	145	170	204	223	223	21	22	25	20	21	—3
Perth,	102	95	97	94	85	16	8	9	7	5	—5
Argyle, Bute,	102	104	127	133	114	14	11	17	6	7	—8
	126	138	159	168	163	18	17	18	14	13	—5
Eastern—											
Elgin, Banff,	83	89	105	103	96	8	10	13	9	9	—1
Aberdeen,	38	45	51	47	38	5	7	7	5	3	—2
Kincardine, Forfar,	24	49	57	62	65	4	13	10	9	11	+1
Fife, Kinross,	59	63	51	49	44	9	5	5	4	5	—2
	43	56	59	59	55	6	9	8	7	7	—1
Central—											
Haddington,	42	55	51	45	36	5	7	5	4	4	—2
Edinburgh, Peebles,	33	62	73	79	68	9	13	11	8	5	—5
Linlithgow, Stirling, Clackmannan, Dumbarton,	26	28	28	26	31	4	5	4	4	4	....
Lanark,	22	35	40	42	45	6	7	5	6	6	...
Renfrew,	16	26	38	33	29	3	5	6	3	3	—2
Ayr,	30	43	40	33	25	2	7	4	3	2	—1
	25	40	45	45	43	6	8	6	6	5	—1
Southern—											
Roxburgh, Berwick, Selkirk,	38	50	49	53	52	9	9	9	5	5	—4
Dumfries, Kirkcudbright, Wigtown,	59	69	57	49	42	9	7	3	4	3	—3
	50	61	54	50	46	9	8	5	4	4	—3
Scotland,	45	58	63	63	59	8	9	8	7	6	—2

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As might be expected from the remarks made above, by far the larger proportion to population of pauper insane under private care occurs in the comparatively poor and sparsely populated Northern and Highland division. The high proportion shown in this division is, however, undoubtedly in part due to the fact brought out in the discussion on the Census Returns in our Forty-fifth Annual Report that there is a larger proportion of insanity, apart altogether from questions of pauperism, in these districts of the country, which is in great measure to be ascribed to depletion of the population by migration and other causes referred to on page lxxiii, and discussed in the Report just mentioned.

Great difference shown between Counties in Proportion of Insane Poor under Private care.

The counties and groups of counties forming the Northern and Highland division present great differences among themselves, varying in the quinquenniad just completed from 223 per 100,000 of population in the Inverness group to 85 in the case of Perth. The other divisions show almost equally great differences in the counties and groups forming them. Thus Elgin and Banff group has a proportion of 96, while in Aberdeen the proportion is 38 only; and in the Central division, while Edinburgh reaches the proportion of 68 and Lanark of 45, in Renfrew it is only 29 and in Ayr (the lowest in Scotland) 25. These figures, and especially those relating to the Central and Eastern divisions, indicate to what a large extent they are merely the result of methods of administration. Comparing the number resident in proportion to population in the earliest quinquenniad included in the Table with the latest, it will be seen that a considerable increase has occurred in the country generally and in all its divisions except the Southern; but comparing the last quinquenniad with that immediately before it, it will be found that in every division a fall has occurred, which is no doubt mainly due to the diminished rate of discharge from asylums.

The rate in proportion to population of those coming annually on the register in proportion to population—what may be called the admission rate—shows in every division a tendency to fall when the results of the two last quinquenniads are compared with those of the three which precede.

Admissions to the Register for the First Time of Private and Pauper Patients.

Admissions fo First Time a better guide to progress of Certified Insanity.

Before summarising the results of this retrospect, we think it desirable to revert again to the subject of admissions, because, apart from conclusions which may be derived from the Census Returns, they afford the only information available which can be accepted with any degree of safety in regard to the occurrence of insanity, that is, the occurrence of insanity in such forms and under such circumstances as have rendered formal certification expedient.

The figures given in Table I. refer only to the insane poor, that is, to persons derived from the class forming the great bulk of the population of the country, who cannot afford treatment as private

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patients. They also have the defect (though they exclude transfers from one establishment to another) of recording each separate case of certification and admission to an asylum as the admission of a different individual, while, as a matter of fact, the same individual is frequently discharged and re-admitted again and again, the record of his repeated admissions thus creating in this connection a statistical fallacy.

The following tabular statement shows the proportion to population of patients admitted to asylums who had never previously been admitted, distinguishing between the small class who are able to afford private treatment, and the large class who can only obtain treatment by applying for public relief.

Average yearly number of Private Lunatics Admitted to Establishments who had never previously been Admitted, per 100,000 of Population.						Average yearly number of Pauper Lunatics Admitted to Establishments who had never previously been Admitted, per 100,000 of Population.					
1875–79.	1880–84.	1885–89.	1890–94.	1895–99.	1900–04.	1875–79.	1880–84.	1885–89.	1890–94.	1895–99.	1900–04.
10	9	9	10	10	10	37	39	36	42	46	48

First Admissions of Private Patients show no rise.

This statement, the figures of which are derived from Table V. of Appendix A. to this Report, shows that in the case of private patients admitted to asylums for the first time the proportion to population was 10 for the earliest quinquenniad included in the Table, 9 for the succeeding two, and in the three last 10. The lower proportion in the earlier quinquenniads appears to have been due to some passing influence which, in the case of the quinquenniad 1885–89, affected also the pauper admissions. But in any case, in the period of thirty years over which our statistics on this point extend, there is certainly no increase in the proportion to population in first admissions of private patients. Nevertheless, an examination of the figures in Table III. of Appendix A. to this Report shows that the number of private patients resident has undergone a considerable and steadily progressive increase during the same period from 38 per 100,000 of population to 48 at the present time. This increase is therefore wholly the result of an accumulation similar to what has occurred in the case of pauper patients.

Increase of First Admissions of Pauper Patients.

With regard, however, to first admissions of pauper patients, it will be found that, unlike the first admissions of private patients, they show an increase from 37 in the earliest quinquenniad for which we possess figures to 48 in the last quinquenniad, an increase which, but for the exception of 1885–89 already referred to, has shown steady progress.

Bearing on Question of Increase of Insanity.

It is evident, then, from these figures that as regards private patients they afford no evidence that insanity is of more frequent

occurrence among the social class from which such patients are drawn than it was thirty years ago. But the question arises: Do the increased and increasing number of first admissions among the pauper class prove that insanity is becoming increasingly prevalent among that section of the community from which pauper patients are derived?

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As was pointed out in our last Quinquennial Retrospect, the proportion of private patients first admitted was, in round numbers, about one-fourth of the total first admissions, while they are now about one-fifth; and the tendency of the later figures is towards making this disproportion yet greater. Does this mean that the proportion of persons in the general community able to afford private treatment has fallen in thirty years from one-fourth to one-fifth, and is steadily undergoing a further diminution? To this it can only be answered that all statistical facts at our disposal, such as those bearing upon the spread of wealth in the community and the proportion of the population occupying houses of a certain size, point the other way, and indicate that the proportion of those able to support private patients is more likely to have increased than diminished. On that assumption the figures relating to these patients would therefore rather indicate a diminution of insanity among the portion of the community furnishing them than an increase. However, the question is a very complicated one, depending, among other things, upon the amount of accommodation available for private patients at low rates of board, and it is not necessary in the meantime to assume more than that no change in the proportion of the two sections of the population has taken place. There are good grounds for believing, however, that the section of the community from which private patients are drawn is neither one-fourth of the whole population nor one-fifth, but is a very much smaller proportion—possibly not more than one-twelfth —the inference being that the proportion of insane persons in asylums is much larger in proportion to the section of the population which furnishes them than is the case in the pauper class. Assuming, however, that the relative proportion of these sections, whatever it may be, has not altered, we may conclude from the fact that the figures relating to private patients have not altered, that we have in them an expression of the fullest development of the use of asylums which, under existing circumstances, can take place among that section of the community which furnishes them; while the figures relating to pauper patients would indicate that the section which furnishes them is more and more approaching the extensive use of asylums long ago established to its fullest extent in the section from which private patients are drawn.

Change in Proportion of Private to Pauper Patients.

We present for the first time the following Table III., showing for each county of Scotland during each of the last five years the number of pauper patients placed for the first time on the register either by admission to establishments or by being left at home on certification, and showing the proportion per 100,000 of population of the total number belonging to each county registered for the first time.

Pauper Patients in each County placed for First Time on Register.

TABLE III.

Table showing for each Year from 1900 to 1904 the Total Number of Pauper Lunatics Registered for each County who had never previously been Registered as Lunatics, and the Proportion of such Number per 100,000 of Estimated Population.

Counties.	1900.			1901.			1902.			1903.			1904.			Proportion of Pauper Lunatics never previously Registered, per 100,000 of Estimated Population.					Average of Five Years, 1900-1904.	No. of County.
	Admitted to Establishments.	Placed in Private Dwellings.	Total.	Admitted to Establishments.	Placed in Private Dwellings.	Total.	Admitted to Establishments.	Placed in Private Dwellings	Total.	Admitted to Establishments.	Placed in Private Dwellings.	Total.	Admitted to Establishments.	Placed in Private Dwellings.	Total	1900.	1901.	1902.	1903.	1904.		
1. Aberdeen	158	5	163	128	4	132	159	4	163	134	6	140	146	7	153	54	42	53	45	49	49	1
2. Argyll	30	3	33	31	5	36	28	2	30	32	3	35	32	1	33	45	49	41	48	45	46	2
3. Ayr	97	2	99	99	4	103	93	1	94	96	1	97	114	3	117	39	40	36	37	44	39	3
4. Banff	20	7	27	19	3	22	28	2	30	16	8	24	23	2	25	44	36	49	39	41	42	4
5. Berwick	8	2	10	7	-	7	6	4	10	11	1	12	20	-	20	32	23	33	39	66	39	5
6. Bute	3	1	4	5	-	5	15	-	15	6	-	6	8	1	9	21	27	80	32	48	42	6
7. Caithness	13	8	21	16	5	21	11	3	14	8	5	13	11	5	16	62	62	42	39	49	51	7
8. Clackmannan	14	-	14	10	-	10	15	-	15	10	-	10	14	-	14	44	31	47	31	44	39	8
9. Dumbarton	40	-	40	47	1	48	52	-	52	46	1	47	55	4	59	36	42	45	40	49	42	9
10. Dumfries	31	-	31	28	1	29	19	1	20	27	2	29	19	1	20	43	40	28	40	28	36	10
11. Edinburgh	270	10	280	260	3	263	265	9	274	283	10	293	279	7	286	58	54	55	58	56	56	11
12. Elgin	28	2	30	23	-	23	19	-	19	26	-	26	28	4	32	67	51	42	58	71	58	12
13. Fife	68	3	71	77	5	82	93	4	97	89	4	93	83	-	83	33	37	44	41	36	38	13
14. Forfar	140	7	147	144	9	153	152	7	159	128	-	128	113	9	122	52	54	56	45	43	50	14
15. Haddington	21	2	23	17	-	17	21	3	24	23	-	23	19	-	19	60	44	62	59	49	55	15
16. Inverness	41	8	49	45	11	56	63	15	78	60	16	76	42	20	62	54	62	87	84	69	71	16
17. Kincardine	11	-	11	12	-	12	15	-	15	20	-	20	11	-	11	27	38	36	47	26	35	17
18. Kinross	4	1	5	2	-	2	4	-	4	3	-	3	3	-	3	72	29	57	43	42	49	18
19. Kirkcudbright	9	-	9	17	2	19	14	-	14	9	-	9	5	-	5	23	48	36	23	13	29	19
20. Lanark	705	22	727	715	14	729	782	16	798	658	14	672	776	21	797	55	55	58	48	56	54	20
21. Linlithgow	20	-	20	32	-	32	30	2	32	33	1	34	27	1	28	31	48	47	49	40	43	21
22. Nairn	5	-	5	5	-	5	10	2	12	3	-	3	4	1	5	54	57	129	32	53	65	22
23. Orkney	11	-	11	9	6	15	8	-	8	10	1	11	5	1	6	38	62	28	39	21	36	23
24. Peebles	9	-	9	4	-	4	5	-	5	9	-	9	5	-	5	60	27	33	59	33	42	24
25. Perth	49	1	50	54	-	54	56	1	57	54	4	58	62	3	65	41	44	46	47	53	46	25
26. Renfrew	123	-	123	147	2	149	120	3	123	148	1	149	135	3	138	46	51	45	54	49	49	26
27. Ross and Cromarty	37	9	46	37	7	44	25	10	35	44	12	56	38	9	47	60	58	46	74	62	60	27
28. Roxburgh	19	-	19	13	1	14	14	4	18	27	1	28	17	1	18	39	29	37	59	38	40	28
29. Selkirk	11	-	11	11	-	11	17	1	18	11	-	11	12	-	12	46	47	79	49	54	55	29
30. Shetland	12	2	14	17	3	20	12	3	15	12	1	13	13	2	15	50	71	53	46	54	55	30
31. Stirling	66	2	68	60	2	62	82	4	86	79	2	81	75	5	80	48	44	59	55	53	52	31
32. Sutherland	12	1	13	4	2	6	8	2	10	7	-	7	9	1	10	61	28	47	33	47	43	32
33. Wigtown	13	1	14	15	-	15	12	2	14	10	2	12	9	1	10	43	46	43	38	32	40	33
Scotland	2,098	99	2,197	2,110	90	2,200	2,2	105	2,358	2,132	96	2,228	2,212	113	2,325	50	49	52	49	50	50	

The total figures under the heading "Admitted to Establishments" differ somewhat from those given in the tabular statement on page lxxxiv, because the figures given in that statement, and also those in Table V. of Appendix A., include among patients registered for the first time as admitted to establishments certain patients who had been previously registered as under private care. The figures in this Table are too small, except in the largest counties, to admit of an approach to steadiness from year to year; but it will be observed that for all Scotland the average is 50, which is the average in the earliest and latest year included in the Table. These figures may be relied upon as accurate, but the process of obtaining them from the Board's registers is somewhat laborious, and we have thus only been able to give the figures for five years at present. If, however, the Table is continued in future years, it will eventually constitute a record of the progress of certified insanity among the pauper insane in each county which will be free from many of the fallacies contained in general statistics of lunacy, and will form a useful corrective to misapprehensions which a perusal of the general statistics of lunacy are almost certain to cause among those superficially acquainted with the subject. But while this Table affords a trustworthy view of the progress of certified insanity among the pauper insane in counties and in all Scotland from year to year, it must be carefully noted that it does not settle the question of whether mental unsoundness is increasing in the community, nor does it enable a correct judgment to be formed of the comparative prevalence of insanity as between one county and another, both of which questions rest, as we have already indicated, upon a special series of considerations.

The Statistics of Lunacy from 1858 to 1905. — Quinquennial Retrospect. —

Figures in this Table do not settle question of whether Insanity is increasing, or of comparative Statistics between Counties.

Summary of Conclusions.

The conclusions which may be drawn from this retrospect may be summarised as follows:—

1. There has been in the period of twenty-five years mainly under review a large increase in the number of patients resident in establishments, both absolutely and in proportion to population.

2. The increase of numbers resident in proportion to population has been small in the case of private patients; but in the case of pauper patients it has been large, common to all parts of Scotland, and steadily progressive, the largest increases occurring in the two last quinquenniads.

3. The admissions to asylums of private patients in proportion to population show no increase whatever during the past thirty years.

4. The proportion to population of admissions to establishments of pauper patients shows in the course of thirty years a considerable and almost constantly progressive increase, common to all parts of the country.

5. The increase in the proportion to population of pauper patients admitted, shown in the last quinquenniad as compared with that immediately preceding it, is small and confined to certain counties, most parts of the country showing a fall.

6. The rise in the number resident in the last quinquenniad,

The Statistics of Lunacy from 1858 to 1905.

Quinquennial Retrospect.

notwithstanding an admission rate which has in many cases decreased, and which in no case accounts for the extent of the increase in the number resident, is due to a fall in the rate of discharge, which has been continuous over all parts of the country during the past three quinquenniads, and is specially marked in the five years just ended.

7. This fall appears not to be due wholly to any general cause but to various causes operating in different asylums in varying degree, some of which are probably beyond local control, but others fully within the control of local authorities, and demanding on their part full inquiry and vigorous action, when such is found to be justified.

8. The death-rate of pauper patients in asylums has, as a rule, increased during the last three quinquenniads in the case of asylums serving the more thickly populated parts of the country.

9. The number of pauper patients admitted to the register for the first time has undergone no increase during the past five years.

We have the honour to be,

My Lord Marquess,

Your most obedient humble Servants,

WALTER G. SCOTT, *Chairman.*
JOHN COWAN.
JOHN CHEYNE.
JOHN FRASER.
JOHN MACPHERSON.

T. W. L. SPENCE,
Secretary.

EDINBURGH, 22*nd April* 1905.

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APPENDIX A.—Table I.*

The Number of Lunatics in Establishments and in Private Dwellings, classifying as Private and Pauper Patients, and distinguishing between the Sexes, on 1st January of each Year from 1858 to 1905.

At 1st January.	Number of Private Lunatics						Number of Pauper Lunatics.						Totals.		
	In Asylums.			As Patients in Private Dwellings under Sheriff's Order or Sanction of Board.			In Asylums and Lunatic Wards of Poorhouses.			In Private Dwellings.			Private.	Pauper.	Total.
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1858	506	506	1012	10	10	20	1402	1551	2953	810	974	1784	1032	4737	5769
1859	503	508	1011	11	13	24	1447	1656	3103	838	1039	1877	1035	4980	6015
1860	486	485	971	8	13	21	1567	1812	3379	828	1019	1847	992	5226	6218
Average of the 5 Years, 1861–65.	502	522	1024	8	13	21	1678	1939	3617	746	945	1691	1045	5308	6353
Average of the 5 Years, 1866–70.	558	581	1139	14	18	32	2014	2269	4283	666	855	1521	1171	5804	6975
Average of the 5 Years, 1871–75.	603	649	1252	33	38	71	2356	2654	5010	625	829	1454	1323	6464	7787
Average of the 5 Years, 1876–80.	667	681	1348	45	63	108	2822	3200	6022	565	834	1399	1456	7421	8878
Average of the 5 Years, 1881–85.	710	716	1426	46	75	121	3318	3682	7000	668	1022	1690	1548	8689	10237
1886	707	762	1469	44	76	120	3484	3764	7248	803	1255	2058	1589	9306	10895
1887	708	781	1489	45	85	130	3541	3725	7266	837	1303	2140	1619	9406	11025
1888	728	813	1541	44	88	132	3612	3774	7386	876	1394	2270	1673	9656	11329
1889	759	877	1636	42	89	131	3721	3879	7600	894	1403	2297	1767	9897	11664
1890	773	864	1637	46	82	128	3789	3999	7788	975	1470	2445	1765	10233	11998
Average of the 5 Years.	735	819	1554	44	84	128	3629	3828	7457	877	1365	2222	1682	9700	11382
1891	771	908	1679	40	84	124	3884	4104	7988	993	1496	2489	1803	10477	12280
1892	788	914	1702	42	83	125	3963	4244	8207	973	1462	2435	1827	10642	12469
1893	825	948	1773	37	78	115	3979	4339	8318	996	1523	2519	1888	10837	12725
1894	861	940	1801	40	68	108	4062	4414	8476	1013	1552	2565	1909	11041	12950
1895	915	968	1883	37	76	113	4241	4575	8816	1073	1604	2677	1996	11493	13489
Average of the 5 Years.	832	936	1768	39	78	117	4026	4335	8361	1010	1527	2537	1885	10898	12783
1896	910	1025	1935	37	74	111	4282	4675	8957	1100	1600	2700	2046	11657	13703
1897	897	1048	1945	38	75	113	4496	4865	9361	1066	1601	2667	2058	12028	14086
1898	919	1099	2018	37	76	113	4700	5007	9707	1078	1576	2654	2131	12361	14492
1899	953	1104	2057	40	83	123	4877	5220	10,097	1089	1613	2702	2180	12799	14979
1900	960	1110	2070	47	78	125	5049	5282	10,331	1084	1619	2703	2195	13034	15229
Average of the 5 Years.	928	1077	2005	40	77	117	4681	5010	9691	1083	1602	2685	2122	12376	14498
1901	969	1121	2090	47	77	124	5197	5395	10,592	1064	1605	2669	2214	13261	15475
1902	995	1139	2134	49	81	130	5442	5508	10,950	1051	1580	2631	2264	13581	15845
1903	964	1151	2115	47	82	129	5613	5711	11,324	1068	1574	2642	2244	13966	16210
1904	1026	1200	2226	45	82	127	5679	5725	11,404	1077	1581	2658	2353	14062	16415
1905	1022	1232	2254	44	81	125	5841	5859	11,700	1114	1590	2704	2379	14404	16783
Average of the 5 Years.	995	1169	2164	46	81	127	5554	5640	11194	1075	1586	2661	2291	13855	16146

* Inmates of Schools for Imbeciles and in the Lunatic Department of the General Prison are not included in this Table. Their numbers at 1st January of each year from 1858 to 1905 will be found in the Table following.

APPENDIX A.—Table II.

The different Modes in which Lunatics, both Private and Pauper, have been provided for on 1st January of each Year from 1858 to 1905.

YEARS.	In Royal and District Asylums.	In Private Asylums.	In Parochial Asylums, Lunatic Wards of Poor-houses with Unrestricted Licence.	In Lunatic Wards of Poorhouses with Restricted Licence.	In Private Dwellings.	Total Number of Registered Lunatics.	In Lunatic Department of General Prison.	In Training Schools.	General Total.
1858	2380	745	840		1804	5769	26	29	5824
1859	2496	821	797		1901	6015	29	28	6072
1860	2632	852	866		1868	6218	33	22	6273
Average of 5 Years, 1861–1865.	**2880**	**883**	**879**		**1712**	**6354**	**31**	**34**	**6419**
Average of 5 Years, 1866–1870.	**3824**	**569**	**459**	**569**	**1553**	**6975**	**47**	**91**	**7113**
Average of 5 Years, 1871–1875.	**4697**	**320**	**657**	**588**	**1525**	**7787**	**51**	**132**	**7971**
Average of 5 Years, 1876–1880.	**5459**	**192**	**1072**	**647**	**1508**	**8878**	**57**	**161**	**9096**
Average of 5 Years, 1881–1885.	**6168**	**155**	**1380**	**723**	**1811**	**10237**	**57**	**212**	**10506**
1886	6297	139	1445	836	2178	10895	62	230	11187
1887	6326	128	1444	857	2270	11025	56	228	11309
1888	6440	148	1460	879	2402	11329	52	228	11609
1889	6707	158	1493	878	2428	11664	57	233	11954
1890	6882	156	1511	876	2573	11998	58	246	12302
Average of 5 Years.	**6530**	**146**	**1471**	**865**	**2370**	**11382**	**57**	**233**	**11672**
1891	7116	152	1517	882	2613	12280	57	258	12595
1892	7347	163	1524	875	2560	12469	57	273	12799
1893	7488	157	1570	876	2634	12725	55	278	13058
1894	7648	158	1614	857	2673	12950	54	296	13300
1895	7957	152	1726	864	2790	13489	54	309	13852
Average of 5 Years.	**7512**	**156**	**1590**	**871**	**2654**	**12783**	**55**	**283**	**13121**
1896	8293	144	1614	841	2811	13703	57	333	14098
1897	8812	137	1505	852	2780	14086	62	352	14500
1898	9243	142	1419	921	2767	14492	56	358	14906
1899	10440	136	668	910	2825	14979	48	372	15399
1900	10696	121	679	905	2828	15229	52	382	15663
Average of 5 Years.	**9497**	**136**	**1177**	**886**	**2802**	**14498**	**55**	**359**	**14912**
1901	10967	126	544	1045	2793	15475	46	378	15899
1902	11289	139	550	1115	2761	15845	46	397	16288
1903	11659	125	502	1153	2771	16210	51	397	16658
1904	11845	125	508	1152	2785	16415	53	426	16894
1905	12364	123	520	947	2829	16783	50	408	17241
Average of 5 Years.	**11625**	**126**	**525**	**1082**	**2788**	**16146**	**49**	**401**	**16596**

APPENDIX A.—TABLE III.

Proportions, founded on the figures of Table I., of Private Lunatics and of Pauper Lunatics in Asylums and Private Dwellings per 100,000 of the Population; the Proportion of Registered Paupers per 100,000 of Population; and the Proportion of Pauper Lunatics per 100,000 of Registered Paupers, for each Year from 1858 to 1905.

YEARS.	Population.*	Proportions per 100,000 of Population.								
		Private Lunatics.			Pauper Lunatics.			* Total Number of Lunatics.	* Number of Registered Paupers.	Proportion of Pauper Lunatics in every 100,000 of Registered Paupers.
		In Asylums.	In Private Dwellings.	Total.	In Asylums and other Establishments.	In Private Dwellings.	Total.			
1858	3,027,665	34	1	35	98	59	157	192	2630	5980
1859	3,041,812	33	1	34	102	62	164	198	2616	6287
1860	3,054,738	32	1	33	111	61	172	205	2581	6657
Average of 5 Years, 1861–1865.		**33**	**1**	**34**	**117**	**54**	**171**	**205**	**2528**	**6770**
Average of 5 Years, 1866–1870.		**35**	**1**	**36**	**132**	**47**	**179**	**215**	**2411**	**7415**
Average of 5 Years, 1871–1875.		**37**	**2**	**39**	**147**	**43**	**190**	**229**	**2183**	**8727**
Average of 5 Years, 1876–1880.		**38**	**3**	**41**	**168**	**39**	**207**	**248**	**1759**	**11773**
Average of 5 Years, 1881–1885.		**38**	**3**	**41**	**186**	**45**	**231**	**272**	**1614**	**14308**
1886	3,885,155	38	3	41	188	53	241	282	1515	15,931
1887	3,914,318	38	3	41	187	55	242	283	1516	15,970
1888	3,943,701	39	3	42	189	58	247	289	1499	16,455
1889	3,973,305	41	3	44	193	58	251	295	1483	16,924
1890	4,003,132	41	3	44	196	62	258	302	1466	17,573
Av. of 5 Yrs.		**40**	**3**	**43**	**190**	**57**	**247**	**290**	**1495**	**16,571**
1891	4,036,245	42	3	45	200	62	262	307	1435	18,244
1892	4,078,910†	42	3	45	203	60	263	308	1399	18,847
1893	4,122,029	43	3	46	204	62	266	312	1443	18,413
1894	4,165,606	44	2	46	206	62	268	314	1451	18,455
1895	4,209,645	45	3	48	212	64	276	324	1465	18,836
Av. of 5 Yrs.		**43**	**3**	**46**	**205**	**62**	**267**	**313**	**1439**	**18559**
1896	4,254,153	46	3	49	213	64	277	326	1474	18,786
1897	4,299,132	46	2	48	220	63	283	331	1497	18,884
1898	4,344,589	47	3	50	225	62	287	337	1504	19,121
1899	4,390,530	47	3	50	233	62	295	345	1496	19,691
1900	4,436,958	47	3	50	235	62	297	347	1469	20,204
Av. of 5 Yrs.		**46**	**3**	**49**	**225**	**63**	**288**	**337**	**1488**	**19,337**
1901	4,483,880	47	3	50	239	60	299	349	1457	20,520
1902	4,531,299	47	3	50	244	59	303	353	1443	20,997
1903	4,579,223	47	3	50	250	58	308	358	1443	21,359
1904	4,627,656	49	3	52	249	58	307	359	1457	21,082
1905	4,676,603	49	3	52	253	58	311	363	1521	23,849
Av. of 5 Yrs.		**48**	**3**	**51**	**247**	**59**	**306**	**357**	**1464**	**21,561**

* The number of Lunatics is taken at the 1st January of each year, and the number of ordinary Paupers at 15th May preceding. The calculations are made on the Population of the previous year—*e.g.*, the calculations for 1905 are made on the Population for 1904—the Population being that of the middle of the year, as estimated by the Registrar-General.

† The proportions from 1892 onwards were recalculated in 1902 on the corrected populations founded upon the Census of 1901.

APPENDIX A.—TABLE IV.

Showing the Total Number of Private and Pauper Lunatics on the Register at 1st January of each year, from 1874 to 1905, the Number placed each year on the Register, the Number removed therefrom each year by discharge or death, and the Proportion of Deaths per cent. of the Average Number on the Register.

YEARS.	Number of Lunatics at 1st January of each Year.	Average Number of Lunatics on the Register in each Year.	Number placed on the Register in each Year.	Removed from the Register in each Year.			Excess of Number placed on the Register in each Year over Number removed from Register, including deaths.	Proportion of deaths per cent. on Average Number on the Register in each Year.
				By Recovery or otherwise ceasing to be under the cognizance of the Board.	Died.	Total.		
1874	7885	7959·0	2033	1274	611	1885	148	7·7
1875	8033	8171·0	2259	1335	648	1983	276	7·9
1876	8309	8480·0	2464	1451	671	2122	342	7·9
1877	8651	8768·5	2441	1559	647	2206	235	7·4
1878	8886	9022·0	2414	1485	657	2142	272	7·3
1879	9158	9271·0	2347	1422	699	2121	226	7·5
Average of 5 Years.		**8742·5**	**2385**	**1450**	**664**	**2114**	**270**	**7·6**
1880	9384	9573·0	2548	1491	679	2170	378	7·1
1881	9762	9928·5	2616	1548	735	2283	333	7·4
1882	10095	10169·5	2435	1512	774	2286	149	7·6
1883	10244	10351·0	2682	1665	803	2468	214	7·8
1884	10458	10542·5	2595	1646	780	2426	169	7·4
Average of 5 Years.		**10112·9**	**2575**	**1572**	**754**	**2326**	**249**	**7·5**
1885	10627	10761·0	2543	1481	794	2275	268	7·4
1886	10895	10960·0	2451	1518	803	2321	130	7·3
1887	11025	11177·0	2524	1437	783	2220	304	7·0
1888	11329	11496·5	2643	1486	822	2308	335	7·1
1889	11664	11831·0	2703	1559	810	2369	334	6·8
Average of 5 Years.		**11245·1**	**2573**	**1496**	**802**	**2298**	**274**	**7·1**
1890	11998	12139·0	2749	1567	900	2467	282	7·4
1891	12280	12374·5	2917	1629	1099	2728	189	8·9
1892	12469	12597·0	2933	1691	986	2677	256	7·8
1893	12725	12837·5	3060	1840	995	2835	225	7·8
1894	12950	13219·5	3203	1746	918	2664	539	6·9
Average of 5 Years.		**12633·5**	**2972**	**1694**	**980**	**2674**	**298**	**7·8**
1895	13489	13596·0	3079	1765	1100	2865	214	8·1
1896	13703	13894·5	3125	1777	965	2742	383	6·9
1897	14086	14289·0	3301	1806	1089	2895	406	7·6
1898	14492	14735·5	3542	1973	1082	3055	487	7·3
1899	14979	15104·0	3440	1929	1261	3190	250	8·3
Average of 5 Years.		**14323·8**	**3297**	**1850**	**1099**	**2949**	**348**	**7·5**
1900	15229	15352·0	3454	1920	1288	3208	246	8·4
1901	15475	15660·0	3481	1892	1219	3111	370	7·8
1902	15845	16027·5	3660	1982	1313	3295	365	8·2
1903	16210	16312·5	3616	2001	1410	3411	205	8·6
1904	16415	16599·0	3658	1964	1326	3290	368	8·0
Average of 5 Years.		**15990·2**	**3574**	**1952**	**1311**	**3263**	**311**	**8·2**
1905	16783							

APPENDIX A.—TABLE V.

Showing for each year, from 1874 to 1904, the Total Number of Private and Pauper Lunatics in Scotland, Registered during the year, who had never previously been Registered as Lunatics, and the Proportion of such Lunatics per 100,000 of Population.

YEAR.	Population of Scotland estimated to the middle of the Year.	Number of *Private* Lunatics Registered each year who had never previously been Registered.			Number of *Pauper* Lunatics Registered each year who had never previously been Registered.			Total Number of Lunatics Registered each year who had never previously been Registered.			Proportion of Lunatics Registered each year who had never previously been Registered, per 100,000 of the Population.		
		Establish-ments.	Private Dwellings.	Total.	Establish-ments.	Private Dwellings.	Total.	Private.	Pauper.	Total.	Private.	Pauper.	Total.
1874	3,477,704	324	13	337	1141	60	1201	337	1201	1538	9·7	34·5	44·2
1875	3,514,744	376	11	387	1223	134	1357	387	1357	1744	11·0	38·6	49·6
1876	3,552,183	417	6	423	1352	126	1478	423	1478	1901	11·9	41·6	53·5
1877	3,590,022	347	11	358	1424	80	1504	358	1504	1862	10·0	41·9	51·9
1878	3,628,268	332	8	340	1352	104	1456	340	1456	1796	9·4	40·1	49·5
1879	3,665,443	319	13	332	1315	87	1402	332	1402	1734	9·1	38·2	47·3
1880	3,705,995	340	15	355	1445	133	1578	355	1578	1933	9·6	42·6	52·2
1881	3,742,564	332	4	336	1531	122	1653	336	1653	1989	9·0	44·2	53·2
1882	3,770,657	303	4	307	1375	116	1491	307	1491	1798	8·1	39·5	47·6
1883	3,798,961	378	17	395	1492	129	1621	395	1621	2016	10·4	42·7	53·1
1884	3,827,478	368	9	377	1460	88	1548	377	1548	1925	9·9	40·4	50·3
1885	3,856,307	320	8	328	1414	117	1531	328	1531	1859	8·5	39·7	48·2
1886	3,885,155	347	9	356	1358	98	1456	356	1456	1812	9·1	37·5	46·6
1887	3,914,318	363	5	368	1404	112	1516	368	1516	1884	9·4	38·7	48·1
1888	3,943,701	387	6	393	1485	104	1589	393	1589	1982	10·0	40·3	50·3
1889	3,973,305	379	8	387	1480	151	1631	387	1631	2018	9·7	41·1	50·8
1890	4,003,132	413	7	420	1568	103	1671	420	1671	2091	10·5	41·7	52·2
1891	4,036,245	426	4	430	1642	97	1739	430	1739	2169	10·7	43·1	53·8
1892	4,078,910	419	3	422	1718	115	1833	422	1833	2255	10·3	44·9	55·2
1893	4,122,029	417	7	424	1764	115	1879	424	1879	2303	10·3	45·6	55·9
1894	4,165,606	387	9	396	1924	127	2051	396	2051	2447	9·5	49·2	58·7
1895	4,209,645	417	5	422	1781	123	1904	422	1904	2326	10·0	45·2	55·2
1896	4,254,153	394	6	400	1882	112	1994	400	1994	2394	9·4	46·9	56·3
1897	4,299,132	439	6	445	1963	101	2064	445	2064	2509	10·4	48·0	58·4
1898	4,344,589	459	11	470	2080	124	2204	470	2204	2674	10·8	50·7	61·5
1899	4,390,530	456	6	462	2090	107	2197	462	2197	2659	10·5	50·0	60·5
1900	4,436,958	442	15	457	2141	99	2240	457	2240	2697	10·3	50·5	60·8
1901	4,483,880	444	10	454	2144	90	2234	454	2234	2688	10·1	49·8	59·9
1902	4,531,299	449	11	460	2280	105	2385	460	2385	2845	10·2	52·6	62·8
1903	4,579,223	523	11	534	2147	96	2243	534	2243	2777	11·7	49·0	60·7
1904	4,627,656	463	2	465	2223	113	2336	465	2336	2801	10·0	50·5	60·0

APPENDIX A.—TABLE VI.

The Numbers of Private and Pauper Lunatics resident in Royal, District, Private, and Parochial Asylums, and in Lunatic Wards of Poorhouses, on 1st January of each year from 1858 to 1904; the Numbers thereinto Admitted; the Numbers therefrom Discharged Recovered and Not Recovered; the Numbers Transferred from one establishment to another; and the Numbers that Died therein in each of the said years.

YEARS.	Number Resident at 1st January.				Number Admitted during Year (including Transfers).				Number Discharged during Year.								Number Transferred during Year.				Number of Deaths during Year.			
	Private.		Pauper.		Private.		Pauper.		Recovered.				* Not Recovered.				Private.		Pauper.		Private.		Pauper.	
									Private.		Pauper.		Private.		Pauper.									
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1858	506	506	1402	1551	203	225	502	696	72	99	172	280	88	80	110	136	10	12	66	90	47	33	141	149
1859	503	508	1447	1656	235	195	553	650	77	85	176	266	64	70	123	115	4	5	77	95	55	29	146	130
Average of 5 Years, 1860–1864	495	512	1637	1900	196	208	599	680	71	85	199	263	70	75	186	215	10	8	119	122	41	32	169	161
Average of 5 Years, 1865–1869	549	569	1926	2168	225	237	751	895	82	101	236	291	77	81	240	312	16	18	168	235	44	39	186	186
Average of 5 Years, 1870–1874	592	635	2304	2596	226	257	827	960	84	94	319	394	81	100	244	287	22	26	136	166	47	44	218	227
Average of 5 Years, 1875–1879	647	681	2705	3077	270	260	1081	1178	86	108	383	478	103	102	341	351	23	21	213	215	56	43	247	235
Average of 5 Years, 1880–1884	712	699	3248	3611	228	253	1149	1303	87	97	447	535	81	85	364	423	17	15	183	209	55	44	276	285
1885	715	747	3401	3773	209	266	1248	1318	54	107	428	492	73	96	477	535	9	19	264	242	74	43	275	306
1886	707	762	3484	3764	221	266	1189	1194	88	89	453	508	73	102	397	447	21	23	198	188	54	45	288	288
1887	708	781	3541	3725	255	286	1089	1262	98	111	392	484	78	87	322	454	17	23	169	185	44	44	314	282
1888	728	813	3612	3774	233	322	1158	1278	73	110	410	534	70	96	356	335	14	22	190	151	52	49	296	312
1889	759	877	3721	3879	229	276	1204	1313	75	126	445	499	74	115	398	409	9	18	172	183	56	43	303	290
Average of 5 Years	723	796	3552	3783	229	283	1178	1273	78	109	426	503	74	99	390	436	14	21	199	190	56	45	295	296
1890	773	864	3789	3999	261	291	1237	1297	95	104	456	519	76	78	367	372	15	15	162	159	82	58	334	304
1891	771	908	3884	4104	284	323	1254	1449	104	122	445	514	90	100	338	427	16	18	152	198	68	84	398	378
1892	788	914	3963	4244	270	302	1335	1432	78	126	528	584	85	81	389	421	21	21	168	195	70	51	403	342
1893	825	948	3979	4339	288	277	1388	1463	93	131	543	642	80	76	384	417	17	17	168	170	76	68	382	341
1894	681	940	4062	4414	266	280	1512	1576	87	110	533	597	76	94	433	464	12	19	199	228	60	46	356	356
Average of 5 Years	804	915	3935	4220	274	295	1345	1443	91	119	501	571	81	86	382	420	16	18	170	190	71	61	375	344
1895	915	968	4241	4575	247	301	1614	1640	94	109	550	614	86	78	605	534	18	15	385	335	66	59	424	390
1896	910	1025	4282	4675	264	271	1552	1621	100	109	519	612	98	81	459	463	30	23	266	262	74	57	364	357
1897	897	1048	4496	4865	287	317	1763	1753	114	117	562	606	73	86	593	595	18	16	398	405	78	69	405	403
1898	919	1099	4700	5007	277	330	1674	1729	123	146	644	649	73	95	418	458	14	12	222	245	70	89	411	405
1899	953	1104	4877	5220	300	306	1730	1588	117	133	620	669	93	93	427	426	25	18	213	237	86	79	508	426
Average of 5 Years	919	1049	4519	4868	275	305	1667	1666	110	123	579	630	85	87	500	495	21	17	297	297	75	71	422	396
1900	960	1110	5049	5282	284	296	1722	1698	103	136	622	654	84	84	476	452	22	15	280	241	98	72	466	492
1901	969	1121	5197	5395	278	298	1739	1662	96	131	622	646	71	81	427	415	23	15	223	216	90	80	445	472
1902	995	1139	5442	5508	257	328	1773	1840	135	139	666	680	82	84	410	445	15	22	224	276	86	95	506	514
1903	1026	1200	5679	5725	300	354	1534	1439	113	161	642	649	106	105	613	657	37	40	378	439	69	89	579	548
1904	1022	1232	5841	5859	315	323	2004	1955	119	124	628	646	106	101	693	645	41	34	450	418	102	62	513	534
Average of 5 Years	994	1160	5442	5554	287	320	1754	1719	113	138	636	655	90	91	524	519	28	25	311	318	89	80	502	512

* Including Patients transferred from one Establishment to another.

APPENDIX A.—Table VII.*

Number of Admissions to Asylums and other Establishments, excluding Transfers from one Establishment to another, in each Year from 1858 to 1904.

YEARS.	Number placed in Establishments, excluding Transfers from one Establishment to another.								
	Private.			Pauper.			General Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1858	193	213	406	436	606	1042	629	819	1448
1859	201	190	391	476	555	1031	677	745	1422
Average of 5 Years, 1860–1864.	**186**	**199**	**385**	**481**	**558**	**1039**	**667**	**757**	**1424**
Average of 5 Years, 1865–1869.	**210**	**221**	**431**	**582**	**660**	**1242**	**792**	**881**	**1673**
Average of 5 Years. 1870–1874.	**204**	**232**	**436**	**691**	**794**	**1485**	**895**	**1026**	**1921**
Average of 5 Years, 1875–1879.	**247**	**239**	**486**	**868**	**963**	**1831**	**1115**	**1202**	**2137**
Average of 5 Years 1880–1884.	**212**	**238**	**450**	**966**	**1094**	**2060**	**1178**	**1332**	**2510**
1885	200	247	447	984	1076	2060	1184	1323	2507
1886	200	243	443	991	1006	1997	1191	1249	2440
1887	238	263	501	920	1077	1997	1158	1340	2498
1888	219	300	519	968	1127	2095	1187	1427	2614
1889	220	259	479	1032	1129	2161	1252	1388	2640
Average of 5 Years.	**215**	**262**	**477**	**979**	**1083**	**2062**	**1194**	**1345**	**2539**
1890	246	276	522	1075	1138	2213	1321	1414	2735
1891	268	305	573	1102	1251	2353	1370	1556	2926
1892	249	281	530	1167	1237	2404	1416	1518	2934
1893	271	260	531	1220	1293	2513	1491	1553	3044
1894	254	261	515	1313	1348	2661	1567	1609	3176
Average of 5 Years.	**257**	**277**	**534**	**1175**	**1253**	**2428**	**1433**	**1530**	**2963**
1895	229	286	515	1229	1305	2534	1458	1591	3049
1896	234	248	482	1286	1359	2645	1520	1607	3127
1897	269	301	570	1365	1348	2713	1634	1649	3283
1898	263	318	581	1452	1484	2936	1715	1802	3517
1899	275	288	563	1517	1351	2868	1792	1639	3431
Average of 5 Years.	**254**	**287**	**542**	**1370**	**1369**	**2739**	**1624**	**1657**	**3281**
1900	262	281	543	1442	1457	2899	1704	1738	3442
1901	255	283	538	1516	1446	2962	1771	1729	3500
1902	242	306	548	1549	1564	3113	1791	1870	3661
1903	300	354	654	1534	1439	2973	1834	1793	3627
1904	274	289	563	1554	1537	3091	1828	1826	3654
Average of 5 Years.	**267**	**302**	**569**	**1519**	**1489**	**3008**	**1786**	**1791**	**3577**

* Patients sent to Training Schools for Imbecile Children and to the Lunatic Department of the General Prison are not included in this or the following Table.

APPENDIX A.—Table VIII.

The Numbers of Discharges from Asylums and other Establishments, excluding Transfers, and the Numbers of Deaths therein during each Year from 1858 to 1904.

YEARS.	Removals Recovered.		Removals not Recovered, excluding Transfers.		Removals by Death.		Total Removals.		
	Private.	Pauper.	Private	Pauper.	Private.	Pauper.	Private.	Pauper.	Total.
1858	171	452	146	90	80	290	397	832	1229
1859	162	442	125	66	84	276	371	784	1155
Average of 5 Years, 1860–1864.	**156**	**463**	**127**	**159**	**74**	**330**	**357**	**952**	**1309**
Average of 5 Years, 1865–1869.	**183**	**527**	**124**	**149**	**83**	**372**	**390**	**1048**	**1438**
Average of 5 Years. 1870–1874.	**179**	**713**	**132**	**230**	**90**	**444**	**401**	**1387**	**1788**
Average of 5 Years, 1875–1879.	**194**	**861**	**161**	**265**	**99**	**482**	**454**	**1608**	**2062**
Average of 5 Years, 1880–1884.	**184**	**982**	**135**	**394**	**99**	**561**	**418**	**1937**	**2355**
1885	161	920	141	506	117	581	419	2007	2426
1886	177	961	131	458	99	576	407	1995	2402
1887	209	876	125	422	88	596	422	1894	2316
1888	183	944	130	350	101	608	414	1902	2316
1889	201	944	162	452	99	593	462	1989	2451
Average of 5 Years.	**186**	**929**	**138**	**437**	**101**	**591**	**425**	**1957**	**2382**
1890	199	975	124	418	140	638	463	2031	2494
1891	226	959	156	415	152	776	534	2150	2684
1892	204	1112	124	447	121	745	449	2304	2753
1893	224	1185	122	463	144	723	490	2371	2861
1894	197	1130	139	470	106	712	442	2312	2754
Average of 5 Years.	**210**	**1072**	**133**	**443**	**133**	**719**	**476**	**2234**	**2709**
1895	203	1164	131	419	125	814	459	2397	2856
1896	209	1131	126	394	131	721	466	2246	2712
1897	231	1168	125	385	147	808	503	2361	2864
1898	269	1293	142	409	159	816	570	2518	3088
1899	250	1289	143	403	165	934	558	2626	3184
Average of 5 Years.	**233**	**1209**	**133**	**402**	**145**	**819**	**511**	**2430**	**2941**
1900	239	1276	131	387	170	958	540	2621	3161
1901	227	1268	114	403	170	917	511	2588	3099
1902	274	1346	129	355	181	1020	584	2721	3305
1903	274	1291	134	453	158	1127	566	2871	3437
1904	244	1273	132	470	164	1047	540	2790	3330
Average of 5 Years.	**252**	**1291**	**128**	**413**	**168**	**1014**	**548**	**2718**	**3266**

APPENDIX A.—Table IX.

The Results of Treatment in different classes of Establishments for each Year from 1858 to 1904.

(a) *Royal and District Asylums.*

Royal and District Asylums.	Average Number Resident.			Admissions (Including Transfers).			Recoveries.			Discharges not Recovered (Including Transfers).			Deaths.			Proportion of Admissions per cent. on Number Resident.			Proportion of Recoveries per cent. on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Year 1858	1253·5	1167·5	2421·0	449	498	947	151	201	352	149	140	289	109	94	203	35·8	42·6	39·1	33·6	40·3	37·2	8·6	8·0	8·4
,, 1859	1307·0	1242·5	2549·5	463	455	918	149	186	335	126	109	235	107	93	200	35·9	36·6	36·0	32·1	40·8	36·5	8·1	7·4	7·8
Average of 5 Years 1860–1864	1434·8	1440·4	2875·2	498	534	1032	174	208	382	150	161	311	132	103	235	34·7	37·1	35·9	35·0	39·0	37·0	9·2	7·1	8·2
Average of 5 Years 1865–1869	1853·1	1889·0	3742·1	709	746	1455	230	275	505	182	196	378	163	152	315	38·2	39·5	38·9	32·5	36·9	34·7	8·8	8·0	8·4
Average of 5 Years 1870–1874	2292·6	2345 3	4637·9	794	883	1677	314	373	687	236	256	492	202	188	390	34·6	37·7	36·2	39·6	42·3	41·0	8·8	8·0	8·4
Average of 5 Years 1875–1879	2604·7	2774·3*	5379·0	915	973	1888	331	432	763	282	274	556	219	193	412	35·1	35·1	35·1	36·2	44·4	40·4	8·4	7·0	7·7
Average of 5 Years 1880–1884	3000·5	3130·9	6131·4	974	1125	2099	388	472	860	303	348	651	248	240	488	32·5	35·9	34·2	39·8	42·0	41 0	8·3	7·7	8·0
Year 1885	3056·0	3245·0	6301·0	1037	1110	2147	359	445	804	389	441	830	263	257	520	33·9	34·2	34·1	34·6	40·1	37·4	8·6	7·9	8·3
,, 1886	3074·0	3237·5	6311·5	1018	1060	2078	418	450	868	337	357	694	253	234	487	33·1	32·7	32·9	41·1	42·5	41·8	8·2	7·2	7·7
,, 1887	3119·0	3269·0	6388·0	993	1101	2094	386	452	838	269	359	628	257	246	503	31·8	33·7	32·8	39·0	41·1	40·1	8·2	7·5	7·9
,, 1888	3220·0	3358·5	6578·5	1039	1161	2200	365	468	833	300	307	607	253	250	503	32·3	34·6	33·4	35·1	40·3	37·9	7·9	7·4	7·6
,, 1889	3324·0	3470·0	6794·0	1053	1162	2215	383	463	846	332	360	692	254	248	502	31·7	33·5	32·6	36·4	39·8	38·1	7·6	7·1	7·4
Average of 5 Years	3158·6	3316·0	6474·6	1028	1119	2147	382	456	838	325	365	690	256	247	503	32·5	33·7	33·2	37·2	40·8	39·0	8·1	7·4	7·8
Year 1890	3413·0	3586·5	6999·5	1107	1178	2285	393	463	856	311	290	601	314	283	597	32·4	32·8	32·6	35·5	39·3	37·5	9·2	7·9	8·5
,, 1891	3507·0	3724·5	7231·5	1137	1347	2484	395	484	879	318	368	686	329	359	688	32·4	36·2	34·3	34·7	35·9	35·4	9·4	9·6	9·5
,, 1892	3570·0	3847·5	7417·5	1210	1298	2508	473	552	1025	325	346	671	382	289	671	33·9	33·7	33·8	39·1	42·5	40·9	10·7	7·5	9·0
,, 1893	3640·5	3927·5	7568·0	1261	1308	2569	479	605	1084	326	336	662	345	318	663	34·6	33·3	33·9	38·0	46·3	42·2	9·5	8·1	8·8
,, 1894	3776·5	4026·0	7802·5	1301	1306	2607	461	500	961	339	365	704	340	293	633	34·4	32·4	33·4	35·4	38·3	36·9	9·0	7·3	8·1
Average of 5 Years	3581·4	3822·4	7403·8	1203	1287	2490	440	521	941	324	341	665	342	308	650	33·6	33·7	33·6	36·6	40·5	38·6	9·5	8·1	8·8
Year 1895	3992·0	4254·0	8246·0	1434	1475	2909	474	544	1018	467	395	862	380	313	693	35·9	34·7	35·3	33·0	36·9	35·0	9·5	7·4	8·4
,, 1896	4104·5	4494·0	8598·5	1406	1499	2905	482	566	1048	345	338	683	336	318	654	34·3	33·4	33·8	34·3	37·8	36·1	8·2	7·1	7·6
,, 1897	4325·5	4702·0	9027·5	1601	1586	3187	539	603	1142	469	399	868	367	379	746	37·0	33·7	35·3	33·7	38·0	35·8	8·5	8·1	8·3
,, 1898	4555·5	4926·0	9481·5	1606	1680	3286	643	664	1307	345	385	730	384	388	772	35·3	34·1	34·3	40·0	39·5	39·8	8·4	7·9	8·1
,, 1899	5102·5	5465·5	10568·0	1807	1710	3517	655	722	1377	455	448	903	535	446	981	35·4	31·3	33·3	36·2	42·2	39·2	10·5	8·2	9·3
Average of 5 Years	4416·0	4768·3	9184·3	1570	1590	3161	558	620	1178	416	393	809	400	369	769	35·1	33·3	34·4	35·6	39·0	37·3	9·1	7·7	8·4
Year 1900	5251·0	5580·5	10831·5	1803	1801	3604	662	720	1382	495	438	933	512	506	1018	34·3	32·3	33·3	36·7	40·0	38·3	9·8	9·1	9·4
,, 1901	5429·5	5698·0	11127·5	1779	1738	3517	650	709	1359	430	429	859	481	496	977	32·8	30·5	31·6	36·5	40·8	38·6	8·9	8·7	8·8
,, 1902	5611·5	5862·0	11473·5	1829	1966	3795	745	763	1508	402	423	825	538	553	1091	32·6	33·5	33·1	40·7	38·8	39·7	9·6	9·4	9·5
,, 1903	5743·0	6009·5	11752·5	2038	2087	4125	690	752	1442	648	705	1353	578	567	1145	35·5	34·7	35·1	37·2	41·0	39·1	10·1	9·4	9·7
,, 1904	6030·5	6283·0	12313·5	2120	2071	4191	681	712	1393	621	567	1188	556	535	1091	35·2	33·0	34·0	32·1	34·4	33·2	9·2	8·5	8·9
Average of 5 Years	5613·1	5886·3	11499·4	1914	1932	3846	686	731	1417	519	512	1031	533	531	1064	34·1	32·8	33·4	35·8	37·8	36·8	9·5	9·0	9·3

APPENDIX A.—TABLE IX.—*continued.*

The Results of Treatment in different classes of Establishments for each year from 1858 to 1904.

(b) *Private Asylums.*

PRIVATE ASYLUMS.	Average Number Resident.			Admissions (Including Transfers).			Recoveries.			Discharges not Recovered (Including Transfers).			Deaths.			Proportion of Admissions per cent. on Number Resident.			Proportion of Recoveries per cent. on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M	F.	T.	M.	F.	T.	M.	F.	T.
YEAR 1858	355·0	462·0	817·0	125	222	347	48	86	134	21	35	56	30	35	65	35·2	48.0	42·5	38·4	38·7	38·6	8·4	7·5	8·0
,, 1859	351·5	490·0	841·5	113	168	281	44	66	110	27	39	66	38	30	68	32·1	34·3	33·4	38·9	39·3	39·1	10·8	6·1	8·1
Average of 5 Years, 1860–1864	385·9	501·5	887·4	132	173	305	32	61	93	66	80	146	30	41	71	34·3	34·5	34·4	24·3	35·0	30·5	7·9	8·2	8·0
Average of 5 Years, 1865–1869	258·5	350·8	609·3	118	168	286	40	56	96	87	118	205	25	28	53	45·6	47·9	46·9	34·1	33·6	33·6	9·7	8·0	8·7
Average of 5 Years, 1870–1874	126·0	211·1	337·1	69	102	171	20	32	52	39	62	101	16	17	33	54·9	48·1	50·7	29·5	31·3	30·4	12·5	8·2	9·8
Average of 5 Years, 1875–1879	76·1	131·3	207·4	34	47	81	14	21	35	17	28	45	9	7	16	45·2	36·1	39·1	39·5	43·5	43·2	12·1	5·6	7·7
Average of 5 Years, 1880–1884	47·3	108·4	155·7	14	23	37	6	8	14	4	10	14	4	7	11	29·2	21·6	23·8	42·0	34·2	37·8	8·9	6·1	7·1
YEAR 1885	44·0	99·5	143·5	6	26	32	2	14	16	4	7	11	6	8	14	13·6	26·1	22·3	33·3	53·8	50·0	13·6	8·0	9·8
,, 1886	40·5	97·5	138·0	11	20	31	3	5	8	8	12	20	3	11	14	27·2	20·5	22·5	27·3	25·0	25·8	7·4	11·3	10·1
,, 1887	41·0	97·0	138·0	21	28	49	5	8	13	5	5	10	6	1	7	51·2	28·9	35·5	23·8	28·6	26·5	14·6	1·0	5·1
,, 1888	46·0	107·0	153·0	15	33	48	3	9	12	4	9	13	4	9	13	32·6	30·8	31·4	20·0	27·3	25·0	8·7	8·4	8·5
,, 1889	47·5	109·5	157·0	18	30	48	8	14	22	8	10	18	3	7	10	37·9	27·4	30·6	44·4	46·7	45·8	6·3	6·4	6·4
Average of 5 Years	43·8	102·1	145·9	14	27	41	4	10	14	6	8	14	4	7	11	32·0	26·4	28·1	28·6	37·0	34·1	10·0	7·1	8·0
YEAR 1890	45·5	108·5	154·0	13	33	46	3	13	16	7	15	22	6	6	12	28·6	30·4	29·9	23·1	39·4	34·8	13·2	5·5	7·8
,, 1891	47·0	110·5	157·5	20	27	47	7	6	13	4	11	15	3	5	8	42·6	24·4	29·8	35·0	22·2	27·7	6·4	4·5	5·1
,, 1892	51·5	108·5	160·0	16	27	43	3	16	19	8	11	19	3	9	12	31·1	24·9	26·9	18·8	59·3	44·2	5·8	8·3	7·5
,, 1893	56·0	101·5	157·5	17	23	40	3	12	15	5	10	15	3	6	9	30·4	22·7	25·4	17·6	52·2	37·5	5·4	5·9	5·7
,, 1894	61·5	93·0	154·5	17	21	38	3	16	19	6	11	17	3	5	8	27·6	22·6	24·6	17·6	76·2	50·0	4·9	5·4	5·2
Average of 5 Years	52·3	104·4	156·7	17	26	43	3	13	16	6	12	18	4	6	10	31·7	25·1	27·3	22·9	48·1	38·3	6·9	5·9	6·3
YEAR 1895	60·5	87·5	148·0	14	21	35	4	5	9	11	7	18	6	10	16	23·1	24·0	23·6	28·6	23·8	25·7	9·9	11·4	10·8
,, 1896	54·0	86·5	140·5	11	24	35	3	11	14	11	8	19	3	6	9	20·4	27·7	24·9	27·3	45·8	40·0	5·6	6·9	6·4
,, 1897	51·0	88·5	139·5	15	26	41	4	9	13	6	7	13	5	5	10	29·4	29·4	29·4	26·7	34·6	31·7	9·8	5·6	7·2
,, 1898	49·0	86·5	135·5	16	21	37	6	9	15	6	10	16	6	6	12	32·7	24·3	27·3	37·5	42·9	40·5	12·2	6·9	8·9
,, 1899	45·0	79·5	124·5	17	15	32	9	8	17	5	10	15	8	7	15	37·8	18·9	25·7	52·9	53·3	53·1	17·8	8·8	12·0
Average of 5 Years	51·9	85·7	137·6	15	21	36	5	8	13	8	8	16	5	7	12	28·1	25·0	26·2	35·6	39·3	37·8	10·8	7·9	9·0
YEAR 1900	45·5	78·0	123·5	21	20	41	5	13	18	5	4	9	8	1	9	46·2	25·6	33·2	23·8	65·0	43·9	17·6	1·3	7·3
,, 1901	45·5	82·5	128·0	8	22	30	5	8	13	3	4	7	3	3	6	17·6	26·7	23·4	62·5	36·4	43·3	6·6	3·6	4·7
,, 1902	45·0	82·5	127·5	13	21	34	3	13	16	5	4	9	3	11	14	28·9	25·5	26·7	23·1	61·9	47·1	6·7	13·3	11·0
,, 1903	49·0	78·0	127·0	18	12	30	4	8	12	5	2	7	7	4	11	36·7	15·4	23·6	22·2	66·7	40·0	14·3	5·1	8·7
,, 1904	45·0	79·0	124·0	8	18	26	5	9	14	3	3	6	6	2	8	17·8	22·8	21·0	62·5	50·0	53·8	13·3	2·5	6·5
Average of 5 Years	46·0	80·0	126·0	14	18	32	5	10	15	4	3	7	5	4	9	29·6	23·3	25·6	32·4	54·8	45·3	11·7	5·2	7·6

APPENDIX A.—TABLE IX.—*continued.*

The Results of Treatment in different classes of Establishments for each Year from 1858 to 1904.

(c) *Parochial Asylums.*

(Lunatic Wards of Poorhouses with Unrestricted Licences.)

PAROCHIAL ASYLUMS.	Average Number Resident.			Admissions (Including Transfers).			Recoveries.			Discharges not Recovered (Including Transfers).			Deaths.			Proportion of Admissions per cent. on Number Resident.			Proportion of Recoveries per cent. on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
YEAR 1858	187·0	245·0	432·0	110	166	276	45	89	134	16	18	34	37	37	74	58·8	67·7	63·9	40·9	52·4	48·6	19·7	15·1	17·1
,, 1859	199·5	268·5	468·0	131	162	293	57	95	152	22	22	44	37	23	60	65·8	60·4	62·6	43·5	58·6	51·9	18·5	8·5	12·8
Average of 5 Years, 1860–1864	204·0	280·0	484·0	124	133	257	62	72	134	28	34	62	33	28	61	60·6	47·4	53·1	49·8	54·1	52·1	16·3	10·1	12·6
Average of 5 Years, 1865–1869	198·3	262·1	460·4	89	120	209	44	54	98	26	33	59	20	21	41	44·9	45·9	45·4	49·4	44·7	46·9	10·3	8·2	8·9
Average of 5 Years, 1870–1874	253·0	373·2	626·2	139	168	307	64	78	142	36	42	78	27	38	65	54·9	45·1	49·0	46·4	46·4	46·3	10·7	10·2	10·4
Average of 5 Years, 1875–1879	466·6	571·1	1037·7	356	357	713	119	127	246	131	132	263	58	54	112	76·2	62·6	68·7	33·4	35·6	34·5	12·3	9·5	10·8
Average of 5 Years, 1880–1884	626·3	729·9	1356·2	335	342	677	138	147	285	114	116	230	59	60	119	53·5	46·9	49·9	41·3	43·0	42·1	9·5	8·2	8·8
YEAR 1885	676·5	763·5	1440·0	270	312	582	108	133	241	103	111	214	64	53	117	39·9	40·9	40·4	40·0	42·6	41·4	9·5	6·9	8·1
,, 1886	687·0	757·5	1444·5	279	286	565	116	135	251	71	124	195	66	54	120	40·6	37·8	39·1	41·6	47·2	44·4	9·6	7·1	8·3
,, 1887	699·5	752·5	1452·0	254	321	575	92	131	223	81	114	195	82	59	141	36·3	42·7	39·6	36·2	40·8	38·8	11·7	7·8	9·7
,, 1888	702·0	774·5	1476·5	263	348	611	109	164	273	86	84	170	62	74	136	37·5	44·9	41·4	41·4	47·1	44·7	8·8	9·6	9·2
,, 1889	708·0	794·0	1502·0	305	339	644	125	147	272	91	126	217	83	54	137	43·1	42·7	42·9	41·0	43·4	42·2	11·7	6·8	9·1
Average of 5 Years	694·6	768·4	1463·0	274	321	595	110	142	252	86	112	198	71	59	130	39·4	41·8	40·7	40·1	44·2	42·4	10·3	7·7	8·9
YEAR 1890	709·5	804·5	1514·0	304	322	626	147	141	288	84	114	198	77	57	134	42·8	40·0	41·3	48·4	43·8	46·0	10·9	7·1	8·9
,, 1891	709·5	811·0	1520·5	329	325	654	136	141	277	74	103	177	116	77	193	46·4	40·1	43·0	41·3	43·4	42·4	16·3	9·5	12·7
,, 1892	721·0	826·0	1547·0	299	313	612	126	139	265	86	85	171	67	63	130	41·5	37·9	39·6	42·1	44·4	43·3	9·3	7·6	8·4
,, 1893	741·0	851·0	1592·0	344	340	684	152	152	304	80	101	181	93	63	156	46·4	40·0	43·0	44·2	44·7	44·4	12·6	7·4	9·8
,, 1894	783·0	887·0	1670·0	394	447	841	150	188	338	119	130	249	61	81	142	50·3	50·4	50·4	38·1	42·1	40·2	7·8	9·1	8·5
Average of 5 Years	732·8	835·9	1568·7	334	349	683	142	152	294	88	107	195	83	68	51	45·6	41·8	43·6	42·6	43·6	43·1	11·3	8·2	9·6
YEAR 1895	782·5	887·5	1670·0	350	381	731	162	171	333	168	161	329	85	96	181	44·7	42·9	43·8	46·3	44·9	45·6	10·9	10·8	10·8
,, 1896	733·0	826·5	1559·5	353	312	665	130	142	272	172	172	344	85	73	158	48·2	37·7	42·6	36·8	45·5	41·0	11·6	8·8	10·1
,, 1897	699·0	773·5	1472·5	348	334	682	129	107	236	158	212	370	95	67	162	49·8	43·2	46·3	37·1	32·0	34·6	13·6	8·7	11·0
,, 1898	672·0	731·5	1403·5	278	286	564	116	118	234	106	103	209	76	76	152	41·4	39·1	40·2	41·7	41·3	41·5	11·3	10·4	10·8
,, 1899	323·5	350·0	673·5	140	103	243	67	69	136	24	12	36	28	32	60	43·3	29·4	36·1	47·9	67·0	56·0	8·7	9·1	8·9
Average of 5 Years	642·0	713·8	1355·8	294	283	577	121	121	242	126	132	258	74	69	143	45·8	39·7	42·6	41·1	42·9	42·0	11·5	9·6	10·5
YEAR 1900	266·0	282·0	548·0	88	95	183	53	56	109	12	16	28	23	31	54	33·1	33·7	33·4	60·2	58·9	59·6	8·6	11·0	9·9
,, 1901	267·0	280·0	547·0	103	121	224	60	55	115	20	34	54	21	28	49	38·6	43·2	50·0	58·3	45·5	51·3	7·9	10·0	9·0
,, 1902	210·0	266·0	476·0	99	102	201	49	40	89	48	65	113	18	29	47	47·1	38·3	42·2	49·5	39·2	44·3	8·6	10·9	9·9
,, 1903	251·5	253·5	505·0	105	99	204	57	44	101	19	16	35	30	32	62	41·7	39·1	40·4	54·3	44·4	49·5	11·9	12·6	12·3
,, 1904	252·5	261·5	514·0	104	106	210	52	43	95	23	18	41	26	36	62	41·2	40·5	40·9	50·0	40·6	45·2	10·3	13·8	12·1
Average of 5 Years	249·2	268·3	518·0	100	105	205	54	48	102	24	30	54	24	31	55	40·1	39·1	39·6	54·0	45·7	49·8	9·6	11·6	10·6

APPENDIX A.—TABLE IX.—*continued.*

The Results of Treatment in different classes of Establishments for each Year from 1858 to 1904.

(d) *Lunatic Wards of Poorhouses with Restricted Licences.*

LUNATIC WARDS OF POORHOUSES.	Average Number Resident.			Admissions (Including Transfers).			Recoveries.			Discharges not Recovered (Including Transfers).			Deaths.			Proportion of Admissions per cent. on Number Resident.			Proportion of Recoveries per cent. on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T	M.	F.	T.	M.	F.	T.	M.	F.	T.
YEAR 1858	121·0	193·5	314·5	21	35	56	...	5	5	12	23	35	12	16	28	17·3	18·0	17·8	...	14·3	8·9	9·9	8·2	8·9
,, 1859	129·5	225·0	354·5	51	60	111	1	4	5	12	15	27	19	13	32	39·3	26·6	31·3	1·9	6·6	4·5	14·7	5·7	9·0
Average of 5 Years, 1860–1864	153·9	229·7	383·6	39	49	88	3	6	9	11	16	27	15	21	36	25·1	21·3	22·9	8·3	13·1	10·2	9·5	9·3	9·4
Average of 5 Years, 1865–1869	233·2	345·4	578·6	57	97	154	4	6	10	22	44	66	21	24	45	24·3	28·1	26·6	7·8	6·4	6·5	9·2	7·0	7·8
Average of 5 Years, 1870–1874	257·2	339·0	596·2	51	64	115	3	6	9	14	26	40	19	27	46	19·8	18·9	19·3	5·9	9·0	7·8	7·5	8·0	7·7
Average of 5 Years, 1875–1879	286·6	354·8	641·4	46	60	106	5	6	11	14	20	34	16	23	39	15·9	17·0	16·5	11·4	10·3	10·4	5·7	6·6	6·1
Average of 5 Years, 1880–1884	325·6	390·0	715·6	54	65	119	2	5	7	23	34	57	19	23	42	16·6	16·7	16·6	4·4	7·1	5·9	5·8	5·8	5·9
YEAR 1885	386·5	418·5	805·0	144	136	280	13	7	20	54	72	126	16	31	47	37·3	32·5	34·8	9·0	5·1	7·1	4·1	7·4	5·8
,, 1886	427·5	427·0	854·5	102	94	196	4	7	11	54	56	110	20	34	54	23·9	22·0	22·9	3·9	7·4	5·6	4·7	8·0	6·3
,, 1887	436·5	431·5	868·0	76	98	174	7	4	11	45	63	108	13	20	33	17·4	22·7	20·0	9·2	4·1	6·3	3·0	4·6	3·8
,, 1888	443·5	435·0	878·5	74	58	132	6	3	9	36	31	67	29	28	57	16·7	13·3	15·0	8·1	5·2	6·8	6·5	6·4	6·5
,, 1889	441·5	435·5	877·0	57	58	115	4	1	5	41	28	69	19	24	43	12·9	13·3	13·1	7·0	1·7	4·3	4·3	5·5	4·9
Average of 5 Years	427·1	429·5	856·6	91	89	180	7	4	11	46	50	96	19	27	46	21·3	20·7	21·0	7·7	4·5	6·1	4·5	6·4	5·5
YEAR 1890	441·0	438·0	879·0	74	55	129	8	6	14	41	31	72	19	16	35	16·8	12·6	14·7	10·8	10·9	10·9	4·3	3·7	4·0
,, 1891	439·5	439·0	878·5	52	73	125	11	5	16	32	45	77	18	21	39	11·8	16·6	14·2	21·2	6·8	12·8	4·1	4·8	4·4
,, 1892	435·0	440·5	875·5	80	96	176	4	3	7	55	60	115	21	32	53	18·4	21·8	20·1	5·0	3·1	4·0	4·8	7·3	6·1
,, 1893	433·5	440·5	874·0	54	69	123	2	4	6	53	46	99	17	22	39	12·5	15·7	14·1	3·7	5·8	4·9	3·9	5·0	4·5
,, 1894	418·5	442·0	860·5	66	82	148	6	3	9	45	52	97	12	23	35	15·8	18·6	17·2	9·1	3·7	6·1	2·9	5·2	4·1
Average of 5 Years	433·5	440·0	873·5	65	75	140	6	4	10	45	47	92	17	23	40	15·0	17·0	16·1	9·5	5·6	7·4	4·0	5·2	4·6
YEAR 1895	417·5	435·0	852·5	63	64	127	4	3	7	45	49	94	19	30	49	15·1	14·7	14·9	6·3	4·7	5·5	4·6	6·9	5·7
,, 1896	415·0	432·0	847·0	46	57	103	4	2	6	29	26	55	14	17	31	11·1	13·2	12·2	8·7	3·5	6·0	3·4	3·9	3·7
,, 1897	430·5	456·0	886·5	86	124	210	4	4	8	33	63	96	16	21	37	20·0	27·2	23·7	4·7	3·2	3·8	3·7	4·6	4·2
,, 1898	447·0	468·5	915·5	51	72	123	2	4	6	34	55	89	15	24	39	11·4	15·3	13·4	3·9	5·6	4·9	3·4	5·1	4·3
,, 1899	447·0	460·5	907·5	66	66	132	6	3	9	36	49	85	23	20	43	14·8	14·3	14·5	9·1	4·5	6·8	5·1	4·3	4·7
Average of 5 Years	431·4	450·4	881·8	62	77	139	4	3	7	35	48	83	17	22	39	14·5	17·0	15·8	6·4	4·2	5·2	4·0	5·0	4·5
YEAR 1900	528·5	521·0	1049·5	94	78	172	5	1	6	48	58	106	21	26	47	17·8	15·0	16·4	5·3	1·3	3·5	4·0	5·0	4·5
,, 1901	559·0	521·0	1080·0	127	79	206	3	5	8	45	29	74	30	25	55	22·7	15·2	19·1	2·4	6·3	3·9	5·4	4·8	5·1
,, 1902	590·5	543·5	1134·0	89	79	168	4	3	7	37	37	74	33	16	49	15·1	14·5	14·8	4·5	3·8	4·2	5·6	2·9	4·3
,, 1903	600·0	552·5	1152 5	88	74	162	4	6	10	47	39	86	33	34	67	14·7	13·4	14·1	4·5	8·1	6·2	5·5	6·2	5·8
,, 1904	600·5	545·5	1146·0	87	83	170	9	6	15	152	158	310	27	23	50	14·5	15·2	14·8	10·3	7·2	8·8	4·5	4·2	4·4
Average of 5 Years	575·7	536·7	1112·4	97	79	176	5	4	9	66	64	130	29	25	54	16·8	14·6	15·8	5·2	5·3	5·2	5·0	4·6	4·8

APPENDIX A.—TABLE X.

The Annual Number of Deaths and Classification of the Causes of Death of Patients who Died in Asylums and other Establishments for each Year from 1870 to 1904.

YEARS.	Average Number Resident.		Total Number of Deaths.		Number of foregoing Deaths which took place within a Year after Admission.		Proportion per cent. of Deaths which took place within a Year after Admission on Total Number of Deaths.		NUMBER OF DEATHS OF MALES AND FEMALES FROM SPECIFIC CAUSES.																									
									Cerebral and Spinal Affections.								Thoracic Affections.				Abdominal Affections.													
									Apoplexy and Paralysis.		Epilepsy, and Convulsions.		General Paralysis.		Maniacal and Melancholic Exhaustion.		Organic Disease of Brain, Tumours, &c.		Consumption.		Inflammation of Lungs and Membranes, and other forms of Pulmonary Disease.		Disease of the Heart, Aneurism, &c.		Inflammation of Stomach, Intestines, or Peritoneum.		Disease of Liver, Kidneys, &c.		Dysentery and Diarrhœa.		Fever, Erysipelas, Cancer, &c.		General Debility and Old Age.		Suicides and Accidents.		Cause Unknown.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1870	2816·5	3154·0	259	282	118	129	45·6	45·7	19	23	15	16	41	8	8	23	40	19	30	62	26	32	15	17	8	7	4	6	8	6	8	11	26	48	8	4	3	.
Absolute Annual Average of the 5 years, 1870-1874,	2928·8	3268·7	264·6	270·4	117·6	114·4	44·4	42·3	20·2	21·0	16·4	13·4	42·8	12·2	6·2	16·0	32·6	26·6	33·8	52·0	32·4	27·4	16·2	17·4	9·0	7·2	5·6	8·6	5·8	9·8	7·4	10·4	28·0	42·2	7·6	5·6	0·6	0·6
Average Percentage of Each Cause of Death	.	.	.	.	.	.	.	.	7·6	7·8	6·2	5·0	16·2	4·5	2·3	5·9	12·3	9·8	12·8	19·2	12·2	10·1	6·1	6·4	3·4	2·7	2·1	3·2	2·2	3·6	2·8	3·8	10·6	15·6	2·9	2·1	0·2	0·2
Absolute Annual Average of the 5 years, 1875-1879,	3434·0	3831·5	302·6	278·2	138·2	106·2	45·7	38·2	27·8	22·8	20·4	16·2	54·2	9·6	10·4	17·8	27·2	18·8	38·2	45·2	37·8	30·9	20·6	22·4	7·0	9·4	7·2	10·0	4·4	8·4	10·8	12·8	28·6	50·8	8·0	4·0	.	.
Average Percentage of Each Cause of Death	.	.	.	.	.	.	.	.	9·2	8·2	6·7	5·8	17·9	3·4	3·4	6·4	9·0	6·8	12·6	16·2	12·5	10·1	6·8	8·1	2·3	3·4	2·4	3·6	1·5	3·0	3·6	4·6	9·5	18·3	2·6	1·4	.	.
1880	3833·0	4167·0	287	323	119	119	41·5	36·8	31	25	19	12	47	12	5	18	30	23	29	51	36	35	27	32	13	17	7	13	5	14	12	27	22	38	4	6	.	.
1881	4001·1	4326·6	316	323	139	128	44·0	39·6	42	22	17	10	51	11	10	14	35	28	36	51	36	46	18	32	6	10	9	8	6	7	16	15	26	66	8	3	.	.
1882	4019·5	4384·5	351	322	134	121	38·2	37·6	39	29	27	14	58	13	7	16	33	27	37	65	42	32	30	25	7	11	12	8	5	6	12	21	34	55	8	.	.	.
1883	4047·0	4429·5	343	354	150	128	43·7	36·2	39	31	21	18	58	15	7	21	31	35	42	55	52	51	24	41	9	14	7	7	2	3	10	19	31	57	10	7	.	.
1884	4098·0	4488·5	356	324	141	137	39·6	42·3	27	20	20	11	55	10	17	16	35	42	42	40	55	44	36	36	7	12	9	11	5	5	11	27	31	46	6	4	.	.
Absolute Annual Average	3999·7	4359·2	330·6	329·2	136·6	126·6	41·3	38·5	35·6	25·4	20·8	13·0	53·8	12·2	9·2	17·0	32·8	31·0	37·2	52·4	44·2	37·6	27·0	33·2	8·4	12·8	8·8	9·4	4·6	7·0	12·2	21·8	28·8	52·4	7·2	4·0	.	.
Average Percentage of Each Cause of Death	.	.	.	.	.	.	.	.	10·7	7·7	6·3	3·9	16·3	3·7	2·8	5·2	9·9	9·4	11·2	15·9	13·4	11·4	8·2	10·1	2·5	3·9	2·7	2·9	1·4	2·1	3·7	6·6	8·7	15·9	2·2	1·2	.	.
1885	4163·0	4526·5	349	349	142	139	40·7	39·8	28	30	27	17	61	14	7	18	36	29	37	48	48	35	30	49	13	16	11	7	1	10	14	23	28	52	8	1	.	.
1886	4229·0	4519·5	342	333	136	118	39·8	35·4	25	29	20	16	59	10	8	14	35	38	49	50	47	30	31	39	8	9	9	18	2	2	13	22	28	49	8	7	.	.
1887	4296·0	4550·0	358	326	154	133	43·0	40·8	39	19	18	7	49	17	9	20	46	37	40	52	64	47	37	31	11	10	8	11	2	2	10	23	18	46	7	4	.	.
1888	4411·5	4675·0	348	361	133	146	38·2	40·4	30	26	19	13	71	20	8	22	36	33	39	53	39	43	35	49	17	9	14	14	.	1	15	21	21	52	4	6	.	.
1889	4521·0	4809·0	359	333	151	119	42·1	35·7	34	20	19	15	82	23	11	19	53	47	38	40	30	44	20	31	11	10	14	12	1	2	10	28	28	37	8	5	.	.
Absolute Annual Average	4324·1	4616·0	351·2	340·4	143·2	131·0	40·8	38·5	31·2	24·8	20·6	13·6	64·4	16·8	8·6	18·6	41·2	36·8	40·6	48·6	45·6	39·5	30·6	39·8	12·0	10·8	11·2	12·4	1·2	3·4	12·4	23·4	24·6	47·2	7·0	4·6	.	.
Average Percentage of Each Cause of Death	.	.	.	.	.	.	.	.	8·9	7·3	5·9	4·0	18·3	4·9	2·4	5·5	11·7	10·8	11·6	14·3	13·0	11·6	8·7	11·7	3·4	3·2	3·2	3·6	0·3	1·0	3·5	6·9	7·0	13·9	2·0	1·3	.	.
1890	4609·0	4937·5	416	362	153	144	36·8	39·8	30	23	29	14	90	18	13	21	43	54	34	49	56	56	37	34	9	12	14	10	5	2	19	26	29	42	8	1	.	.
1891	4703·0	5085·0	466	462	191	183	41·0	39·6	32	32	18	10	92	28	17	18	57	55	57	71	53	59	50	57	8	15	10	12	1	5	33	48	29	48	9	4	.	.
1892	4777·5	5222·5	473	393	196	161	41·4	41·0	24	31	23	26	97	12	14	21	65	47	58	59	61	53	41	49	19	13	14	7	1	3	19	27	24	40	13	5	.	.
1893	4871·0	5320·5	458	409	194	148	42·4	36·2	24	30	33	22	104	22	19	22	53	58	62	51	45	50	35	44	8	18	13	6	1	1	26	27	30	54	5	4	.	.
1894	5039·5	5448·0	416	402	174	168	41·8	41·8	22	24	22	15	97	18	11	30	57	62	52	59	48	40	44	51	13	18	12	14	1	2	9	28	16	39	12	2	.	.
Absolute Annual Average	4800·0	5202·7	445·8	405·6	181·6	160·8	40·7	39·6	26·4	28·0	25·0	17·4	96·0	19·6	14·8	22·4	55·0	55·2	52·6	57·8	52·6	51·6	41·4	47·0	11·4	15·2	12·6	9·8	1·8	2·6	21·2	31·2	25·6	44·6	9·4	3·2	.	.
Average Percentage of Each Cause of Death	.	.	.	.	.	.	.	.	5·9	6·9	5·6	4·3	21·5	4·8	3·3	5·5	12·3	13·6	11·8	14·3	11·8	12·7	9·3	11·6	2·6	3·7	2·8	2·4	0·4	0·6	4·8	7·7	5·7	11·0	2·1	0·8	.	.
1895	5252·5	5664·0	490	449	213	180	43·5	40·1	26	41	37	15	103	16	12	30	44	46	68	55	58	62	42	57	19	16	7	13	1	6	30	38	35	50	8	4	.	.
1896	5306·5	5839·0	438	414	183	189	41·8	45·7	29	30	14	16	115	24	16	19	43	51	67	63	36	34	39	49	12	26	8	17	1	4	11	30	32	46	15	5	.	.
1897	5506·0	6020·0	483	472	210	190	43·5	40·3	29	31	26	21	115	21	18	15	52	49	51	69	53	63	57	55	12	18	13	18	1	2	27	44	17	61	12	5	.	.
1898	5723·5	6212·5	481	494	209	204	43·5	41·3	31	41	20	17	105	27	12	22	39	61	81	60	54	62	44	77	10	16	13	19	1	.	30	46	34	40	7	6	.	.
1899	5918·0	6355·5	594	505	259	206	43·6	40·8	44	40	27	17	119	26	17	27	53	54	90	73	65	49	71	69	13	15	20	17	1	3	32	51	35	64	7	6	.	.
Absolute Annual Average	5541·3	6018·2	497·2	466·8	214·8	193·8	43·2	41·6	31·8	36·6	24·8	17·2	111·4	22·8	15·0	22·6	46·2	52·2	71·4	64·0	53·2	52·8	50·6	61·4	13·2	18·2	12·2	16·8	1·0	3·0	26·0	41·8	30·6	52·2	9·8	5·2	.	.
Average Percentage of Each Cause of Death	.	.	.	.	.	.	.	.	6·4	7·8	5·0	3·7	22·4	4·9	3·0	4·8	9·3	11·2	14·4	13·7	10·7	11·3	10·2	13·2	2·7	3·9	2·5	3·6	0·2	0·6	5·2	9·0	6·2	11·2	2·0	1·1	.	.
1900	6091·0	6461·5	564	564	237	234	42·0	41·5	31	44	24	16	96	19	26	20	57	70	63	77	62	65	82	82	17	21	16	12	.	2	42	71	36	60	12	5	.	.
1901	6301·0	6581·5	535	552	254	259	47·5	46·9	36	43	25	28	136	31	23	33	62	53	54	83	52	53	56	91	10	19	11	12	1	3	20	32	36	59	13	7	.	.
1902	6457·0	6754·0	592	609	246	257	41·6	42·2	29	49	26	20	140	35	16	39	49	46	76	94	69	70	75	79	25	26	11	15	1	4	34	40	37	79	4	4	.	.
1903	6643·5	6893·5	648	637	267	283	41·2	44·4	50	43	30	22	162	34	27	39	51	57	70	90	69	69	69	86	9	21	20	16	2	6	29	59	49	87	11	8	.	.
1904	6928·5	7169·0	615	596	257	257	41·8	43·1	38	35	24	24	127	43	23	39	32	53	79	86	81	89	89	79	18	27	14	29	5	5	25	37	48	73	12	7	.	.
Absolute Annual Average	6484·2	6771·9	590·8	589·8	252·2	258·0	42·8	43·6	36·8	43·8	25·8	22·0	132·2	32·4	23·0	34·0	50·2	55·8	68·4	86·0	66·6	65·0	74·2	83·4	15·8	22·8	14·4	16·8	1·8	4·0	30·0	47·8	41·2	71·6	10·4	6·2	.	.
Average Percentage of Each Cause of Death	.	.	.	.	.	.	.	.	6·2	7·4	4·4	3·7	22·4	5·5	3·9	5·7	8·5	9·4	11·6	14·6	11·3	11·0	12·5	14·1	2·7	3·8	2·4	2·8	0·3	0·7	5·1	8·1	7·0	12·1	1·7	1·1	.	.

The Statistics of Pauper Lunatics in Private Dwellings for Forty-seven Years, 1858–1904.

YEARS.	Admitted to Roll of Patients in Private Dwellings.							Ceased to be Patients in Private Dwellings.										Died.			On Roll at 31st December of each year.			Percentage of Recoveries on Admissions.			Percentage of Deaths on the Numbers at 31st December of each year.		
	Intimated by Inspectors of Poor.		Transferred from Asylums.		Total.			Recovered.			Removed from Roll by Friends.			Transferred to Asylums.															
	M.	F.	M.	F.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
During 1858	153	237	8	6	161	243	404	18	13	31	11	16	27	31	56	87	43	55	98	838	1039	1877	11	5	8	5·2	5·5	5·4
,, 1859	63	113	5	2	68	115	183	8	25	33	13	26	39	21	34	55	36	50	86	828	1019	1847	12	22	18	4·3	4·9	4·7
Average of 5 Years, 1860–1864	43	54	14	22	58	76	134	8	11	19	13	17	30	19	20	39	43	50	93	746	945	1691	14	15	14	5·7	5·3	5·5
Average of 5 Years, 1865–1869	46	63	15	25	61	88	149	5	10	15	10	14	25	20	27	48	37	53	89	666	855	1521	9	11	10	5·5	6·2	5·9
Average of 5 Years, 1870–1874	27	39	33	51	59	90	150	7	11	18	12	8	20	16	27	43	36	49	85	626	828	1455	12	12	12	5·7	5·9	5·8
Average of 5 Years, 1875–1879	48	65	19	38	67	103	170	4	8	12	8	9	17	24	33	57	35	43	78	566	834	1399	6	8	7	6·2	5·2	5·6
Average of 5 Years, 1880–1884.	53	74	63	96	116	169	285	7	10	17	9	12	20	31	39	70	34	54	88	668	1022	1690	6	6	6	5·1	5·3	5·2
Average of 5 Years, 1885–1889	55	70	92	139	147	209	356	8	11	19	9	11	20	44	52	96	40	64	104	877	1365	2242	6	5	5	4·6	4·7	4·6
During 1890	42	71	97	101	139	172	311	12	19	31	14	12	26	52	49	101	43	66	109	993	1496	2489	9	11	10	4·3	4·4	4·4
,, 1891	45	59	74	103	119	162	281	7	13	20	17	21	38	58	57	115	57	105	162	973	1462	2435	6	8	7	5·9	7·2	6·7
,, 1892	44	85	108	129	152	214	366	7	12	19	12	13	25	66	64	130	44	64	108	996	1523	2519	5	6	5	4·4	4·2	4·3
,, 1893	63	63	83	126	146	189	335	11	17	28	16	15	31	53	57	110	49	71	120	1013	1552	2565	8	9	8	4·8	4·6	4·7
,, 1894	56	78	107	122	163	200	363	7	13	20	17	9	26	53	58	111	26	68	94	1073	1604	2677	4	6	6	2·4	4·2	3·5
Average of 5 Years	50	71	94	116	144	187	331	9	15	24	15	14	29	56	57	113	44	75	119	1010	1527	2537	6	8	7	4·3	4·9	4·7
During 1895	56	74	83	104	139	178	317	8	15	23	6	11	17	44	57	101	54	99	153	1100	1600	2700	6	8	7	4·9	6·2	5·7
,, 1896	44	72	49	87	93	159	252	15	15	30	14	13	27	57	61	118	41	69	110	1066	1601	2667	16	9	12	3·8	4·3	4·1
,, 1897	61	63	58	77	119	140	259	6	15	21	8	6	14	52	57	109	41	87	128	1078	1576	2654	5	11	8	3·8	5·5	4·8
,, 1898	57	75	65	110	122	185	307	9	16	25	12	7	19	51	59	110	39	66	105	1089	1613	2702	7	9	8	3·6	4·1	3·9
,, 1899	57	62	77	103	134	165	299	6	9	15	11	7	18	64	45	109	58	98	156	1084	1619	2703	4	5	5	5·4	6·1	5·8
Average of 5 Years	55	69	66	96	121	165	286	9	14	23	10	9	19	53	56	109	46	84	130	1083	1602	2685	7	8	8	4·3	5·2	4·9
During 1900	42	58	61	87	103	145	248	4	8	12	12	10	22	47	46	93	60	95	155	1064	1605	2669	4	6	5	5·6	5·9	5·8
,, 1901	49	45	64	96	113	141	254	10	13	23	16	10	26	53	62	115	47	81	128	1051	1580	2631	9	9	9	4·5	5·1	4·9
,, 1902	46	60	73	88	119	148	267	10	13	23	8	8	16	50	62	112	34	71	105	1068	1574	2642	8	9	9	3·2	4·5	4·0
,, 1903	43	56	75	112	118	168	286	12	14	26	7	4	11	48	67	115	42	76	118	1077	1581	2658	10	8	9	3·9	4·8	4·4
,, 1904	59	60	93	110	152	170	322	16	14	30	7	15	22	53	58	111	39	74	113	1114	1590	2704	11	8	9	3·5	4·7	4·2
Average of 5 Years	48	56	73	99	121	155	276	10	12	22	10	9	19	50	59	109	44	79	123	1074	1586	2660	9	8	8	4·1	5·0	4·7

The Number of Pauper Lunatics belonging to each County who were placed on the Register and sent to Asylums or other Establishments,* or left in Private Dwellings in each year from 1860 to 1904.

Populations for 1901 / Ways in which the Patients were provided for.	SCOTLAND. 4,472,103		Aberdeen. 313,825		Argyll. 73,642		Ayr. 254,468		Banff. 61,488		Berwick. 30,824	
	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.
1860	1015	125	82	9	10	9	43	8	11	3	9	2
Absolute Annual Average of the 5 Years 1860-1864	989·0	110·4	80·8	6·8	18·2	7·2	43·0	5·2	11·0	2·2	8·6	1·4
Annual Average per 100,000 of Population (calculated on Populations of 1861)	32	4	36	3	23	9	22	3	19	4	24	4
Absolute Annual Average of the 5 years, 1865-1869	1210·0	108·6	92·0	8·0	29·4	8·0	56·8	9·2	16·2	4·2	8·6	1·6
Annual Average per 100,000 of Population (calculated on the Mean of 1861-71)	38	3	39	3	38	10	28	5	27	7	24	4
Absolute Annual Average of the 5 years, 1870-1874	1465·8	65·6	100·0	7·8	37·4	4·0	77·0	3·0	18·2	1·4	8·8	1·6
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	44	2	41	3	49	5	38	1	30	2	24	4
Absolute Annual Average of the 5 years, 1875-1879	1811·0	112·8	117·2	5·8	47·4	4·4	97·4	4·6	19·6	4·8	12·8	2·4
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	51	3	46	2	62	6	47	2	32	8	36	7
1880	1970	144	122	15	50	5	102	6	31	5	8	3
1881	2089	133	139	9	62	6	97	1	30	4	15	2
1882	1932	124	140	8	62	4	103	2	19	2	5	2
1883	2089	142	123	8	61	9	111	3	22	9	16	1
1884	2043	92	127	6	50	3	111	1	26	...	12	1
Absolute Annual Average	2024·6	127·0	130·2	9·2	57·0	5·4	104·8	2·6	25·6	4·0	11·2	1·8
Annual Average per 100,000 of Population (calculated on the Populations of 1881)	54	3	49	3	74	7	48	1	42	7	32	5
1885	2011	122	127	11	58	2	113	5	32	1	12	2
1886	1926	107	105	9	54	3	122	4	27	4	13	3
1887	1953	119	112	4	46	7	104	5	24	4	12	...
1888	2040	115	123	4	59	5	112	4	29	2	9	3
1889	2100	163	110	10	60	4	104	9	30	3	13	...
Absolute Annual Average	2006·0	125·2	115·4	7·6	55·4	4·2	111·0	5·4	28·4	2·8	9·8	1·6
Annual Average per 100,000 of Population (calculated on the Mean of 1881-91)	52	3	42	3	73	6	50	2	45	4	28	5
1890	2150	113	140	7	54	6	116	2	32	2	8	2
1891	2273	104	134	7	50	6	110	1	16	3	10	4
1892	2306	129	152	6	50	7	142	9	28	6	12	2
1893	2441	126	130	4	56	6	131	5	43	1	12	5
1894	2535	134	120	10	61	8	131	3	38	6	15	2
Absolute Annual Average	2341·0	121·2	135·2	6·8	54·2	6·6	126·0	4·0	31·4	3·6	11·4	3·0
Annual Average per 100,000 of Population (calculated on the Populations of 1891)	58	3	48	2	72	9	56	2	51	6	35	9
1895	2448	130	143	1	56	4	147	4	17	7	11	1
1896	2556	116	145	8	40	4	137	5	35	2	11	2
1897	2618	124	149	3	52	4	152	1	36	2	12	...
1898	2850	132	177	9	73	3	159	4	38	1	11	1
1899	2790	119	178	6	54	1	149	4	32	2	13	...
Absolute Annual Average	2652·4	124·2	158·4	5·4	55·0	3·2	148·8	3·6	31·6	2·8	11·6	0·8
Annual Average per 100,000 of Population (calculated on the Mean of 1891 and 1901)	62	3	53	2	74	4	62	1	51	5	37	3
1900	2818	100	210	5	49	3	132	2	30	7	12	2
1901	2847	94	179	4	45	5	128	4	36	3	9	...
1902	2990	106	211	4	38	2	132	1	37	2	11	3
1903	2874	99	185	6	51	4	132	1	26	8	14	1
1904	3003	119	217	7	48	1	127	3	39	2	23	...
Absolute Annual Average	2906·4	103·6	200·4	5·2	46·2	3·0	130·2	2·2	33·6	4·4	13·8	1·2
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	65	2	64	2	63	4	51	1	55	7	45	4

Populations for 1901 / Ways in which the Patients were provided for.	Bute. 18,787		Caithness. 33,870		Clackmannan. 32,029		Dumbarton. 113,865		Dumfries. 72,571		Edinburgh. 488,061	
	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.
1860	10	...	5	14	3	1	17	2	19	3	179	4
Absolute Annual Average of the 5 Years 1860-1864	5·8	0·6	7·4	6·2	4·0	1·8	14·8	0·8	23·2	2·6	146·6	4·2
Annual Average per 100,000 of Population (calculated on Populations of 1861)	36	4	18	15	17	8	27	1	31	3	53	2
Absolute Annual Average of the 5 years, 1865-1869	4·0	0·8	8·8	4·6	5·0	0·8	17·2	0·8	29·6	3·0	175·6	5·6
Annual Average per 100,000 of Population (calculated on the Mean of 1861-71)	24	5	21	11	21	3	30	1	39	4	58	2
Absolute Annual Average of the 5 years, 1870-1874	9·0	0·2	7·6	3·4	9·0	0·6	23·6	0·4	29·6	1·0	189·0	4·6
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	53	1	19	8	34	2	39	1	40	1	58	1
Absolute Annual Average of the 5 years, 1875-1879	9·4	1·6	12·6	7·4	10·8	0·8	28·6	1·0	33·0	3·4	235·2	6·2
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	54	9	31	18	39	3	41	1	44	5	66	2
1880	9	...	17	7	12	...	35	...	24	3	269	12
1881	13	1	10	7	10	...	33	1	41	2	253	7
1882	10	...	12	5	15	1	35	...	38	4	231	6
1883	8	1	19	8	13	1	36	2	32	2	275	14
1884	8	...	16	6	13	1	35	...	35	...	271	11
Absolute Annual Average	9·6	0·4	14·8	6·6	12·6	0·6	34·8	0·6	34·0	2·2	259·8	10·0
Annual Average per 100,000 of Population (calculated on the Populations of 1881)	54	2	37	17	44	2	45	1	45	3	67	3
1885	8	1	13	9	4	1	43	1	31	2	240	12
1886	8	...	13	6	9	...	33	...	31	1	240	6
1887	11	...	14	10	7	...	24	...	30	...	272	7
1888	6	...	17	8	9	...	35	2	29	...	249	8
1889	13	1	18	14	16	1	45	...	34	3	258	13
Absolute Annual Average	9·2	0·4	15·0	9·4	9·0	0·4	36·0	0·6	31·0	1·2	251·8	9·2
Annual Average per 100,000 of Population (calculated on the Mean of 1881-91)	51	2	39	24	31	1	42	1	41	2	61	2
1890	13	...	15	9	11	...	42	1	29	...	273	3
1891	13	...	11	7	13	1	36	...	34	3	276	5
1892	8	3	11	3	14	...	35	...	27	1	299	9
1893	17	...	14	6	16	...	35	...	34	1	300	9
1894	11	1	17	6	22	...	55	...	44	...	351	10
Absolute Annual Average	12·4	0·8	13·6	6·2	15·2	0·2	40·6	0·2	33·6	1·0	299·8	7·2
Annual Average per 100,000 of Population (calculated on the Populations of 1891)	67	4	37	17	46	1	41	...	45	1	69	2
1895	10	...	16	3	11	2	52	...	44	2	298	10
1896	10	...	19	7	20	...	56	2	45	...	337	13
1897	9	...	19	7	19	...	65	...	30	1	265	9
1898	16	...	15	5	13	2	63	3	31	2	321	15
1899	12	...	19	6	11	3	70	...	22	1	349	8
Absolute Annual Average	11·4	...	17·6	5·6	14·8	1·4	61·2	1·0	34·4	1·2	314·0	11·0
Annual Average per 100,000 of Population (calculated on the Mean of 1891 and 1901)	61	...	50	16	45	4	58	1	47	2	68	2
1900	5	1	16	8	15	...	51	...	42	...	391	10
1901	5	...	20	5	17	1	76	1	37	2	354	3
1902	21	...	16	8	23	...	67	...	28	1	360	9
1903	7	...	10	5	16	...	71	1	39	2	363	11
1904	11	1	15	5	19	...	76	4	26	1	374	7
Absolute Annual Average	9·8	0·4	15·4	5·2	18·0	0·2	68·2	1·2	33·4	1·2	368·4	8·0
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	52	2	45	15	56	1	60	1	46	2	75	2

Populations for 1901 / Ways in which the Patients were provided for.	Elgin. 44,800		Fife. 218,840		Forfar. 284,082		Haddington. 38,665		Inverness. 90,674		Kincardine. 31,537	
	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.
1860	17	3	40	3	72	6	11	3	17	6	17	...
Absolute Annual Average of the 5 Years 1860-1864	14·0	2·0	39·0	3·8	74·8	3·6	10·4	1·2	12·2	6·4	12·4	0·6
Annual Average per 100,000 of Population (calculated on Populations of 1861)	32	5	25	2	37	2	28	3	14	7	36	2
Absolute Annual Average of the 5 years, 1865-1869	13·2	2·2	44·8	3·4	97·0	5·8	15·2	2·4	26·2	6·8	11·0	1·8
Annual Average per 100,000 of Population (calculated on the Mean of 1861-71)	30	5	28	2	44	3	40	6	30	8	32	5
Absolute Annual Average of the 5 years, 1870-1874	16·8	1·6	54·4	2·0	104·0	2·2	14·6	0·2	33·2	3·2	11·8	1·2
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	39	4	34	1	44	1	39	1	38	4	34	3
Absolute Annual Average of the 5 years, 1875-1879	21·2	5·4	58·8	3·8	133·2	3·4	16·4	0·8	31·2	11·0	11·0	1·0
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	48	12	35	2	53	1	43	2	35	12	31	3
1880	25	3	73	2	138	7	11	2	69	16	19	1
1881	16	4	76	4	178	4	30	1	51	18	17	...
1882	32	2	79	5	141	6	23	1	46	20	12	2
1883	28	...	67	3	174	4	31	2	46	18	18	...
1884	30	2	82	2	165	3	28	...	41	17	14	...
Absolute Annual Average	25·2	2·2	75·4	3·2	159·2	4·8	24·6	1·2	50·6	17·8	16·0	0·6
Annual Average per 100,000 of Population (calculated on the Populations of 1881)	57	5	44	2	60	2	64	3	56	20	45	2
1885	24	2	78	7	154	6	21	...	56	22	14	...
1886	25	2	75	2	122	9	20	1	42	11	13	...
1887	17	2	67	4	148	3	23	3	50	21	17	...
1888	17	4	83	2	135	8	13	...	58	17	11	...
1889	19	5	76	2	149	6	25	1	51	19	13	1
Absolute Annual Average	20·4	3·0	75·8	3·4	141·6	6·4	20·4	1·0	51·4	18·0	13·6	0·2
Annual Average per 100,000 of Population (calculated on the Mean of 1881-91)	47	7	42	2	52	2	54	3	57	20	38	1
1890	23	1	85	1	149	10	34	2	56	18	14	1
1891	33	3	89	3	173	4	26	2	57	14	17	...
1892	30	3	95	5	169	3	24	1	63	13	13	...
1893	43	2	81	3	201	2	33	1	72	10	20	...
1894	40	2	88	3	194	4	32	...	71	19	14	...
Absolute Annual Average	33·8	2·2	87·6	3·0	177·2	4·6	29·8	1·2	63·8	14·8	15·6	0·2
Annual Average per 100,000 of Population (calculated on the Populations of 1891)	78	5	46	2	64	2	80	3	71	16	44	1
1895	40	5	99	6	188	5	36	1	63	19	16	...
1896	41	4	101	2	213	10	25	...	64	15	15	...
1897	42	3	111	3	191	6	26	2	91	19	17	...
1898	32	...	113	4	220	7	31	1	79	13	19	...
1899	41	3	109	4	182	7	31	1	59	10	14	...
Absolute Annual Average	39·2	3·0	106·6	3·8	198·8	7·0	29·8	1·0	71·2	15·2	16·2	...
Annual Average per 100,000 of Population (calculated on the Mean of 1891 and 1901)	89	7	52	2	71	2	78	3	78	17	51	...
1900	31	2	104	3	179	7	29	2	58	8	15	...
1901	32	...	100	5	198	9	25	...	66	11	15	...
1902	31	...	116	5	209	7	36	3	83	15	19	...
1903	33	...	120	4	185	...	30	...	80	16	22	...
1904	34	5	112	...	161	9	26	...	75	22	16	...
Absolute Annual Average	32·2	1·4	110·4	3·4	186·4	6·4	29·2	1·0	72·4	14·4	17·4	...
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	72	3	50	2	65	2	76	3	80	16	55	...

Populations for 1901 / Ways in which the Patients were provided for.	Kinross. 6,981		Kirkcudbright. 39,383		Lanark. 1,314,810		Linlithgow. 66,443		Nairn. 8,721		Orkney. 28,699	
	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.
1860	3	...	19	1	230	7	13	...	1	...	3	2
Absolute Annual Average of the 5 Years 1860-1864	1·0	...	14·2	1·8	244·0	11·4	10·8	1·0	1·8	...	4·0	2·8
Annual Average per 100,000 of Population (calculated on Populations of 1861)	14	...	33	4	38	2	28	3	22	...	12	9
Absolute Annual Average of the 5 years, 1865-1869	3·6	0·2	11·8	2·0	321·0	6·6	11·6	0·6	2·4	0·8	2·4	1·4
Annual Average per 100,000 of Population (calculated on the Mean of 1861-71)	50	3	28	5	46	1	29	1	26	9	8	4
Absolute Annual Average of the 5 years, 1870-1874	1·2	0·8	11·4	2·2	405·8	3·4	13·4	0·2	1·6	0·2	3·4	2·2
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	19	12	27	5	52	...	32	...	19	2	11	7
Absolute Annual Average of the 5 years, 1875-1879	2·2	...	12·6	0·6	531·2	8·0	18·2	0·6	3·8	0·2	7·8	4·8
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	35	...	30	1	61	1	43	1	44	2	25	15
1880	2	...	16	1	531	20	24	1	8	...	13	4
1881	5	...	22	2	565	13	27	...	10	...	14	5
1882	1	1	15	...	589	18	24	1	5	...	11	5
1883	3	...	16	1	571	18	24	1	5	...	10	2
1884	6	...	12	...	608	9	18	2	3	...	11	3
Absolute Annual Average	3·4	0·2	16·2	0·8	562·8	15·6	23·4	1·0	6·2	...	11·8	3·8
Annual Average per 100,000 of Population (calculated on the Populations of 1881)	56	3	38	2	60	2	53	2	70	...	37	12
1885	1	1	23	2	552	13	19	...	7	...	16	2
1886	4	...	19	1	588	9	24	...	10	...	8	2
1887	2	...	12	2	573	13	25	1	8	2	9	3
1888	4	...	16	...	614	14	28	1	6	...	6	...
1889	2	3	17	2	594	12	28	2	5	...	9	2
Absolute Annual Average	2·6	0·8	17·4	1·4	574·2	12·2	24·8	0·8	7·2	0·4	9·6	1·8
Annual Average per 100,000 of Population (calculated on the Mean of 1881-91)	42	13	42	3	57	1	51	2	76	4	31	6
1890	8	...	16	2	607	18	22	2	11	...	16	3
1891	6	...	15	...	738	13	23	...	8	...	16	2
1892	4	...	19	...	656	15	25	1	5	...	11	4
1893	5	...	20	...	641	19	29	1	5	...	18	2
1894	4	...	18	1	696	18	35	1	4	1	19	8
Absolute Annual Average	4·4	..	17·6	0·6	663·6	16·6	26·8	1·0	6·6	0·4	16·0	3·8
Annual Average per 100,000 of Population (calculated on the Populations of 1891)	66	...	44	2	61	2	50	2	78	5	53	12
1895	8	...	19	1	666	29	17	...	14	2	9	3
1896	5	...	19	1	675	13	27	...	3	...	15	8
1897	6	1	12	...	760	30	30	...	9	...	13	7
1898	4	...	11	5	795	24	25	...	12	...	10	4
1899	4	...	20	1	857	32	33	2	8	1	11	3
Absolute Annual Average	5·4	0·2	16·2	1·6	750·6	25·6	26·4	0·4	9·2	0·6	11·6	5·0
Annual Average per 100,000 of Population (calculated on the Mean of 1891 and 1901)	79	3	41	4	62	2	44	1	107	7	39	17
1900	4	1	17	...	907	23	29	...	6	...	15	...
1901	2	...	20	2	922	15	37	...	7	...	13	6
1902	5	...	17	...	985	16	40	2	12	2	10	...
1903	8	...	15	...	874	14	40	1	5	...	12	2
1904	4	...	13	...	1037	23	36	1	4	1	12	1
Absolute Annual Average	3·6	0·2	16·4	0·4	943·0	18·2	36·4	0·8	6·8	0·6	12·4	1·8
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	52	3	42	1	72	1	55	1	78	7	43	6

Populations for 1901 / Ways in which the Patients were provided for.	Peebles. 15,066		Perth. 123,283		Renfrew. 293,497		Ross. 76,450		Roxburgh. 48,804		Selkirk. 23,356	
	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.
1860	4	1	40	8	72	2	13	19	13	2	4	...
Absolute Annual Average of the 5 Years 1860-1864	5·0	0·2	42·2	8·0	70·0	1·4	9·8	9·6	15·0	6·0	2·8	0·8
Annual Average per 100,000 of Population (calculated on Populations of 1861)	44	2	32	6	41	1	12	12	28	11	29	8
Absolute Annual Average of the 5 years, 1865-1869	2·6	0·8	43·6	6·6	80·8	2·2	17·0	6·4	14·0	1·4	3·2	0·4
Annual Average per 100,000 of Population (calculated on the Mean of 1861-71)	22	7	33	5	42	1	21	8	26	3	27	3
Absolute Annual Average of the 5 years, 1870-1874	4·8	0·2	51·0	3·2	113·6	1·8	27·8	5·6	21·0	0·2	6·0	...
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	39	2	40	3	58	1	34	7	39	...	45	...
Absolute Annual Average of the 5 years, 1875-1879	5·2	...	68·6	8·0	120·8	1·0	34·2	9·4	20·2	0·4	5·8	0·2
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	40	...	54	6	57	...	42	12	35	1	36	1
1880	4	1	65	8	131	...	45	10	29	1	5	...
1881	5	...	72	12	146	2	30	13	27	1	9	...
1882	5	...	57	9	131	2	28	3	24	...	9	...
1883	2	...	74	9	126	1	38	12	26	...	12	...
1884	6	...	65	4	116	1	26	4	29	1	5	...
Absolute Annual Average	4·4	0·2	66·6	8·4	130·0	1·2	33·4	8·4	27·0	0·6	8·0	...
Annual Average per 100,000 of Population (calculated on the Populations of 1881)	32	1	52	7	58	1	42	11	45	1	43	...
1885	4	...	70	1	141	1	42	10	24	...	10	...
1886	7	...	77	9	139	...	36	11	24	...	2	...
1887	5	2	61	7	127	2	34	7	22	2	4	...
1888	4	...	65	2	127	5	47	5	24	3	8	1
1889	7	...	66	6	150	...	34	22	22	3	9	...
Absolute Annual Average	5·4	0·4	67·8	5·0	136·8	1·6	38·6	11·0	23·2	1·6	6·6	0·2
Annual Average per 100,000 of Population (calculated on the Mean of 1881-91)	38	3	53	4	53	1	49	14	41	3	29	1
1890	3	...	73	3	161	1	29	12	26	...	4	...
1891	4	...	58	6	150	3	39	13	27	1	8	...
1892	4	...	53	4	151	...	43	18	34	2	10	2
1893	7	...	75	6	197	1	45	31	28	...	19	4
1894	2	...	82	5	169	...	48	13	25	3	8	1
Absolute Annual Average	4·0	...	68·2	4·8	165·6	1·0	40·8	17·4	28·0	1·2	9·8	1·4
Annual Average per 100,000 of Population (calculated on the Populations of 1891)	27	...	56	4	68	...	52	22	52	2	36	5
1895	4	...	79	3	169	...	46	14	27	2	13	...
1896	5	1	95	...	177	3	59	6	28	1	27	2
1897	4	...	82	1	191	2	48	11	34	2	17	2
1898	11	...	108	2	224	...	42	15	34	2	18	...
1899	8	...	85	...	201	1	38	11	29	1	10	...
Absolute Annual Average	6·4	0·2	89·8	1·2	192·4	1·2	46·6	11·4	30·4	1·6	17·0	0·8
Annual Average per 100,000 of Population (calculated on the Mean of 1891 and 1901)	43	1	73	1	71	...	60	1	59	3	67	3
1900	9	...	79	1	162	...	49	9	25	...	17	...
1901	7	...	87	...	195	2	52	8	20	1	13	...
1902	6	...	86	1	174	3	40	10	20	5	21	1
1903	11	...	80	4	204	1	55	13	37	1	11	...
1904	6	...	79	3	194	3	51	10	21	1	19	...
Absolute Annual Average	7·8	...	82·2	1·8	185·8	1·8	49·4	10·0	24·6	1·6	16·2	0·2
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	52	...	67	1	63	1	65	13	50	3	69	1

Populations for 1901 / Ways in which the Patients were provided for.	Shetland. 28,166		Stirling. 142,291		Sutherland. 21,440		Wigtown. 32,685	
	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.	Sent to Asylums.	Left in Priv. Dwel.
1860	1	...	24	2	5	2	8	3
Absolute Annual Average of the 5 Years 1860-1864	3·4	2·6	25·2	3·4	4·6	1·6	9·0	3·2
Annual Average per 100,000 of Population (calculated on Populations of 1861)	11	8	28	4	19	7	21	8
Absolute Annual Average of the 5 years, 1865-1869	3·0	3·8	28·4	0·4	4·6	2·2	9·4	3·8
Annual Average per 100,000 of Population (calculated on the Mean of 1861-71)	9	12	30	...	19	9	23	9
Absolute Annual Average of the 5 years, 1870-1874	5·4	2·4	40·4	2·2	4·2	1·0	10·8	1·6
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	17	8	43	2	18	4	28	4
Absolute Annual Average of the 5 years, 1875-1879	9·4	4·4	54·4	2·4	7·6	3·2	13·2	1·8
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	31	14	54	2	33	14	34	5
1880	7	6	53	1	10	3	13	1
1881	9	6	54	1	6	5	17	2
1882	6	7	51	2	12	2	11	4
1883	19	7	67	4	10	...	11	2
1884	10	2	40	2	11	7	13	4
Absolute Annual Average	0·2	5·6	53·0	2·0	9·8	3·4	13·0	2·6
Annual Average per 100,000 of Population (calculated on the Populations of 1881)	34	19	49	2	44	15	34	7
1885	8	1	48	1	9	2	9	4
1886	14	5	50	1	9	3	13	5
1887	11	3	55	1	10	2	17	2
1888	10	6	58	3	9	5	20	3
1889	24	9	65	...	15	6	19	4
Absolute Annual Average	13·4	1·8	55·2	1·2	10·4	3·6	15·6	3·6
Annual Average per 100,000 of Population (calculated on the Mean of 1881-91)	46	6	47	1	47	16	42	10
1890	4	4	52	3	13	...	16	...
1891	16	2	58	...	14	1	15	...
1892	18	6	71	4	15	...	15	1
1893	20	4	71	2	11	...	12	1
1894	15	2	68	3	15	2	23	2
Absolute Annual Average	14·6	3·6	64·0	2·4	13·6	0·6	16·2	0·8
Annual Average per 100,000 of Population (calculated on the Populations of 1891)	51	13	54	2	62	3	45	2
1895	14	3	93	2	10	1	13	...
1896	8	2	66	3	18	1	15	1
1897	9	4	92	1	14	...	11	3
1898	16	5	86	1	30	4	13	...
1899	10	3	89	1	25	5	17	2
Absolute Annual Average	11·4	3·4	85·2	1·6	19·4	2·2	13·8	1·2
Annual Average per 100,000 of Population (calculated on the Mean of 1891 and 1901)	40	12	65	1	89	10	40	3
1900	11	2	86	2	17	1	16	1
1901	19	3	81	2	10	2	20	...
1902	14	3	99	4	12	2	16	2
1903	12	...	105	2	14	...	12	2
1904	16	2	97	5	11	1	14	1
Absolute Annual Average	14·4	2·0	93·6	3·0	12·8	1·2	15·6	1·2
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	51	7	66	2	59	6	48	4

* Inmates of Schools for Imbeciles are not included in this Table.

APPENDIX A.—Table XIII.

The Number of Pauper Lunatics belonging to each County who were transferred from Private Dwellings to Establishments or from Establishments to Private Dwellings in each Year from 1860 to 1904.

Years.	Scotland		Aberdeen.		Argyll.		Ayr.		Banff.		Berwick		Bute.	
	Transferred from Private Dwellings to Asylums.	Transferred from Asylums to Private Dwellings.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.
1860	53	33	1	2	1	.	3	[illegible]	.	.	3	.	.	.
Absolute Annual Average of the 5 Years (1860–1864)	39	36	1·0	1·8	1·6	2·0	1·8	2·2	0·6	0·4	0·8	.	0·4	0·2
Annual Average per 100,000 of Population (1861)	1·3	1·2	0·4	0·8	2·0	2·5	0·9	1·1	1·0	0·7	2·2	.	2·4	1·2
Absolute Annual Average of the 5 Years (1865–1869)	48	40	4·0	2·8	1·4	2·0	4·0	2·4	1·0	0·6	0·8	0·6	0·8	0·4
Annual Average per 100,000 of Population (Mean of 1861–71)	1·5	1·2	1·7	1·2	1·8	2·6	2·0	1·2	1·7	1·0	2·2	1·6	4·8	2·4
Absolute Annual Average of the 5 Years (1870–1874)	43	84	2·8	4·4	3·8	6·2	4·0	3·2	0·4	2·2	.	0·8	.	0·4
Annual Average per 100,000 of Population (1871)	1·3	2·5	1·1	1·8	5·0	8·2	2·0	1·6	0·7	3·6	.	2·2	.	2·4
Absolute Annual Average of the 5 Years (1875–1879)	57	57	3·2	1·8	3·4	3·0	3·8	3·6	1·2	1·8	0·8	0·8	1·2	1·0
Annual Average per 100,000 of Population (Mean of 1871–81)	1·6	1·6	1·2	0·7	4·5	3·9	1·8	[illegible]	2·0	3·0	2·2	2·2	6·9	5·8
1880	47	100	4	1	4	1	4	4	.	.	1	.	.	1
1881	60	95	6	4	1	2	1	3	.	1	1	.	.	.
1882	79	214	4	7	4	9	3	3	.	.	1	1	.	.
1883	81	198	1	9	3	15	3	1	1	.	2	7	1	5
1884	85	184	5	2	6	5	2	3	.	.	.	13	.	.
Absolute Annual Average	70	158	4·0	4·6	3·6	6·4	2·6	2·8	0·2	0·2	1·0	4·2	0·2	1·2
Annual Average per 100,000 of Population (1881)	1·9	4·2	1·5	1·7	4·7	8·4	1·2	1·3	0·3	0·3	2·8	11·9	1·1	6·8
1885	86	287	9	24	3	2	1	4	.	1	2	1	.	.
1886	103	232	3	7	2	7	3	[illegible]	.	.	2	4	.	.
1887	95	233	4	5	3	.	4	7	2	3	1	5	1	1
1888	97	164	3	3	3	3	4	5	1	2	1	1	.	1
1889	99	240	5	14	2	13	6	[illegible]	3	8	1	1	.	3
Absolute Annual Average	96	231	4·8	10·6	2·6	5·0	3·6	11·2	1·2	2·8	1·4	2·4	0·2	1·0
Annual Average per 100,000 of Population (Mean of 1881–91)	2·5	6·0	1·7	3·9	3·4	6·6	1·6	5·0	1·9	4·5	4·1	7·1	1·1	5·5
1890	101	198	5	23	6	13	11	7	1	12	1	2	.	.
1891	115	177	11	13	2	5	2	4	2	6	3	.	.	4
1892	130	237	11	13	1	5	4	9	1	2	2	3	.	.
1893	110	209	8	15	.	4	6	4	3	5	3	2	.	2
1894	111	229	6	6	4	7	7	5	2	3	.	.	.	2
Absolute Annual Average	113	210	8·2	14·0	2·6	6·8	6·0	[illegible]	1·8	5·6	1·8	1·4	.	1·6
Annual Average per 100,000 of Population (1891)	2·8	5·2	2·9	4·9	3·5	9·1	2·7	2·6	2·9	9·1	5·6	4·3	.	8·7
1895	101	187	3	18	.	2	3	7	3	2	1	.	.	2
1896	118	136	9	12	1	1	5	8	2	1	1	.	.	.
1897	109	135	15	14	.	2	8	.	1	4	.	2	.	.
1898	110	175	9	3	.	2	1	1	1	1	.	.	.	.
1899	109	180	4	3	5	4	3	4	.	1	1	.	2	.
Absolute Annual Average	109·4	162·6	8·0	5·0	1·2	2·2	4·0	4·0	1·4	1·8	0·6	0·4	0·4	0·4
Annual Average per 100,000 of Population (Mean of 1891–1901)	2·5	3·8	2·7	3·3	1·6	3·0	1·7	1·7	2·3	2·9	1·9	1·3	2·2	2·2
1900	93	148	7	2	1	3	1	6	2	3	...	4	...	...
1901	115	160	4	4	4	4	4	1	4	4	...	1	1	...
1902	112	161	...	2	2	1	3	1	2	2	...	...	...	...
1903	115	187	5	3	3	2	1	1	3	2	...	...	...	...
1904	111	203	3	7	1	4	4	2	1	·5	...	...	...	...
Absolute Annual Average	109·2	171·8	3·8	3·6	2·2	2·8	2·6	2·2	2·4	3·2	...	1·	0·2	...
Annual Average per 100,000 of Population (1901)	2·4	3·8	1·2	1·1	3·0	3·8	1·0	[illegible]	3·9	5·2	...	3·2	1·1	...

Years.	Caithness.		Clackmannan.		Dumbarton.		Dumfries.		Edinburgh.		Elgin.		Fife.		Forfar.		Haddington.	
	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.
1860	3	.	3	1	.	.	1	.	4	3	[illegible]	3	1	4	.	4	3	.
Absolute Annual Average of the 5 Years (1860–1864)	1·4	0·2	1·0	0·2	.	1·0	1·2	0·6	2·2	5·4	[illegible]	1·4	2·0	1·8	1·2	2·0	1·0	.
Annual Average per 100,000 of Population (1861)	3·3	0·5	4·2	0·8	.	1·8	1·6	0·8	0·8	2·0	[illegible]	3·2	1·3	1·1	0·6	1·0	2·7	.
Absolute Annual Average of the 5 Years (1865–1869)	1·2	0·2	.	0·2	0·2	0·6	1·4	0·8	3·6	4·8	[illegible]	1·2	2·2	3·2	1·6	1·4	1·2	0·4
Annual Average per 100,000 of Population (Mean of 1861–71)	2·9	0·5	.	0·8	0·3	1·0	1·9	1·1	1·2	1·6	[illegible]	2·8	1·4	2·0	0·7	0·6	3·2	1·1
Absolute Annual Average of the 5 Years (1870–1874)	1·2	1·4	1·0	2·0	0·4	2·0	1·2	1·0	3·2	9·8	[illegible]	3·6	3·0	11·8	1·8	3·4	1·2	0·6
Annual Average per 100,000 of Population (1871)	2·9	3·4	3·7	7·5	0·7	3·3	1·6	1·3	1·0	3·0	[illegible]	8·3	1·9	7·3	0·8	1·4	3·2	1·6
Absolute Annual Average of the 5 Years (1875–1879)	1·8	0·8	0·6	0·4	1·6	1·0	1·4	2·0	4·2	3·2	[illegible]	1·0	6·2	4·8	2·8	1·0	0·4	0·4
Annual Average per 100,000 of Population (Mean of 1871–81)	4·5	2·0	2·2	1·4	2·3	1·4	1·9	2·6	1·2	0·9	[illegible]	2·3	3·7	2·9	1·1	0·4	1·0	1·0
1880	2	.	.	1	1	.	.	.	2	6	[illegible]	1	.	10	2	2	.	.
1881	2	1	.	1	.	1	2	1	9	24	[illegible]	3	2	8	2	1	.	.
1882	1	1	1	.	.	1	1	3	13	38	[illegible]	1	7	32	2	6	2	.
1883	3	1	.	.	1	2	2	13	13	33	[illegible]	3	6	7	3	3	1	2
1884	.	.	1	.	.	.	2	7	16	31	[illegible]	2	1	2	3	24	1	1
Absolute Annual Average	1·6	0·6	0·4	0·4	0·4	0·8	1·4	4·8	10·6	26·4	[illegible]	2·0	3·2	11·8	2·4	7·2	0·8	0·6
Annual Average per 100,000 of Population (1881)	4·0	1·5	1·4	1·4	0·5	1·0	1·8	6·3	2·7	6·8	[illegible]	4·5	1·9	6·9	0·9	2·7	2·1	1·6
1885	2	8	.	2	1	4	2	2	10	70	[illegible]	.	6	4	4	56	2	5
1886	3	2	1	.	1	3	.	1	20	36	[illegible]	5	1	11	13	14	.	2
1887	.	.	.	.	.	3	2	.	11	53	[illegible]	3	2	8	23	52	1	.
1888	3	2	.	.	2	.	1	7	12	33	[illegible]	2	2	1	16	21	.	.
1889	1	1	.	.	1	2	.	.	13	39	[illegible]	.	2	3	8	12	1	2
Absolute Annual Average	1·8	2·6	0·2	0·4	1·0	2·4	1·0	2·0	13·2	46·2	[illegible]	2·0	2·6	5·4	12·8	31·0	0·8	1·8
Annual Average per 100,000 of Population (Mean of 1881–91)	4·7	6·8	0·7	0·4	1·2	2·8	1·3	2·7	3·2	11·2	[illegible]	4·6	1·4	3·0	4·7	11·4	2·1	4·7
1890	3	.	1	1	1	.	3	1	13	29	[illegible]	2	3	2	7	13	1	.
1891	1	2	1	1	2	3	.	.	16	30	[illegible]	3	7	4	7	19	1	.
1892	1	1	.	3	1	1	1	.	21	40	[illegible]	1	3	10	28	57	1	.
1893	.	.	1	.	2	1	.	2	12	64	[illegible]	1	2	6	14	17	1	1
1894	2	.	.	.	.	.	1	2	20	49	[illegible]	4	6	9	15	27	8	2
Absolute Annual Average	1·4	0·6	0·6	1·0	1·2	1·0	1·0	1·0	16·4	42·4	[illegible]	2·2	4·2	6·2	14·2	26·6	1·4	0·6
Annual Average per 100,000 of Population (1891)	3·8	1·6	1·8	3·0	1·2	1·0	1·3	1·3	3·8	9·8	[illegible]	5·1	2·2	3·3	5·1	9·6	3·7	1·6
1895	.	.	.	.	.	.	3	1	12	42	[illegible]	1	2	8	18	25	1	1
1896	.	2	.	1	1	1	.	.	30	36	[illegible]	8	5	3	14	.	.	1
1897	.	5	2	1	.	2	.	2	15	22	[illegible]	.	3	3	5	20	.	.
1898	2	.	1	1	1	11	.	.	21	24	[illegible]	2	5	4	15	32	.	.
1899	.	2	1	5	.	4	2	.	7	21	[illegible]	.	4	5	22	28	.	.
Absolute Annual Average	0·4	1·8	0·8	1·6	0·4	3·6	1·0	0·6	17·0	29·0	[illegible]	2·2	3·8	4·6	13·8	21·0	0·2	0·4
Annual Average per 100,000 of Population (Mean of 1891–1901)	1·1	5·1	2·5	4·9	0·4	3·4	1·4	0·8	3·7	6·3	[illegible]	5·0	1·9	2·2	4·9	7·5	0·5	1·1
1900	...	...	...	1	1	·2	...	...	12	18	[illegible]	...	1	4	8	16	2	1
1901	1	...	1	..	2	3	...	1	15	11	[illegible]	...	3	2	12	26	1	...
1902	...	1	...	...	3	6	1	...	12	13	[illegible]	...	2	12	17	20	...	...
1903	1	...	...	2	3	9	...	2	8	17	[illegible]	1	6	12	14	34	1	1
1904	2	8	1	...	2	1	1	...	16	18	[illegible]	...	4	10	17	48	1	...
Absolute Annual Average	0·8	1·8	0·4	0·6	2·2	4·2	0·4	0·6	12·6	15·4	[illegible]	0·2	3·2	8·0	13·6	28·8	1·0	0·4
Annual Average per 100,000 of Population (1901)	2·4	5·3	1·2	1·9	1·9	3·7	0·6	0·8	2·6	3·2	[illegible]	0·4	1·5	3·7	4·8	10·1	2·6	1·0

Years.	Inverness.		Kincardine.		Kinross.		Kirkcudbright.		Lanark.		Linlithgow.		Nairn.		Orkney.		Peebles.		Perth.	
	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.
1860	3	3	.	1	.	.	2	.	2	.	.	.	2	.	.	1	.	1	9	5
Absolute Annual Average of the 5 Years (1860–1864)	3·4	1·8	0·4	0·8	0·2	0·2	1·4	1·2	2·8	2·8	0·2	.	0·4	0·2	0·4	0·2	.	0·2	3·8	5·6
Annual Average per 100,000 of Population (1861)	3·8	2·0	1·1	2·3	2·8	2·8	3·3	2·8	0·4	0·4	0·5	.	4·8	2·4	1·2	0·6	.	1·8	2·9	4·2
Absolute Annual Average of the 5 Years (1865–1869)	3·0	1·0	1·6	0·4	0·4	0·8	0·8	0·6	6·6	7·6	0·8	0·2	.	.	.	.	.	0·4	1·8	2·0
Annual Average per 100,000 of Population (Mean of 1861–71)	3·4	1·1	4·6	1·1	5·9	11·8	1·9	1·4	0·9	1·1	2·0	0·5	.	.	.	.	.	3·4	1·4	1·5
Absolute Annual Average of the 5 Years (1870–1874)	0·6	2·8	0·4	1·4	.	0·4	1·8	1·0	3·0	5·4	0·2	0·6	.	.	0·4	0·6	0·4	1·0	1·8	3·0
Annual Average per 100,000 of Population (1871)	0·7	3·2	1·1	4·0	.	6·2	4·3	2·4	0·4	0·7	0·5	1·4	.	.	1·3	1·9	3·3	8·2	1·4	2·4
Absolute Annual Average of the 5 Years (1875–1879)	2·2	3·2	1·0	.	.	.	0·8	0·8	5·4	9·2	0·2	0·4	0·4	0·2	0·4	0·2	.	.	4·2	5·0
Annual Average per 100,000 of Population (Mean of 1871–81)	2·5	3·6	2·8	.	.	.	1·9	1·9	0·6	1·1	0·5	0·9	4·6	2·3	1·3	0·6	.	.	3·3	3·9
1880	2	8	1	.	1	2	.	2	8	32	.	.	.	.	.	.	.	.	4	20
1881	5	8	1	1	.	.	.	.	11	12	.	1	1	1	1	1	.	.	8	11
1882	3	11	1	.	.	1	.	.	21	59	.	3	.	.	.	2	.	.	2	16
1883	7	10	1	.	.	.	.	5	14	51	.	.	.	.	1	.	.	.	7	11
1884	4	10	.	.	.	.	2	3	20	42	.	.	.	1	1	2	.	.	6	2
Absolute Annual Average	4·2	9·4	0·8	0·2	0·2	0·6	0·4	2·0	14·8	39·2	.	0·8	0·2	0·4	0·6	1·0	.	.	5·4	12·0
Annual Average per 100,000 of Population (1881)	4·6	10·4	2·3	0·6	3·3	9·9	0·9	4·7	1·6	4·2	.	1·8	2·3	4·5	1·9	3·1	.	.	4·2	9·3
1885	8	11	.	1	.	.	.	2	18	51	1	.	1	.	1	8	.	1	4	4
1886	4	9	1	.	.	1	2	2	24	79	.	1	.	.	.	.	.	.	3	3
1887	4	2	.	2	.	.	.	.	26	60	3	1	.	.	.	1	.	1	1	2
1888	6	5	2	.	.	.	1	3	20	48	1	1	.	1	.	.	.	.	5	2
1889	9	4	2	.	.	.	2	1	21	62	.	3	1	.	.	.	.	.	3	16
Absolute Annual Average	6·2	6·2	1·0	0·6	.	0·2	1·0	1·6	21·8	60·0	1·0	1·2	0·4	0·2	0·2	0·8	.	0·4	3·2	5·4
Annual Average per 100,000 of Population (Mean of 1881–91)	6·9	6·9	2·8	1·7	.	.	2·4	3·9	2·2	6·0	2·1	2·5	4·2	2·1	0·6	2·6	.	2·8	2·5	4·2
1890	7	11	.	.	.	.	1	.	16	34	.	1	1	2	.	.	.	.	4	11
1891	4	6	.	.	.	.	2	.	23	38	4	4	.	1	1	.	1	1	4	3
1892	9	11	.	.	.	1	2	.	25	42	.	.	.	.	.	1	.	1	1	8
1893	6	15	.	.	.	.	1	1	28	41	.	.	.	.	.	1	.	1	6	3
1894	6	8	.	1	.	.	.	1	14	61	.	.	.	.	.	1	.	.	4	8
Absolute Annual Average	6·4	10·2	.	0·2	.	0·2	1·2	0·4	21·2	43·2	0·8	1·0	0·2	0·6	0·2	0·6	0·2	0·6	3·8	6·6
Annual Average per 100,000 of Population (1891)	7·1	11·4	.	0·6	.	3·0	3·0	1·0	1·9	4·0	1·5	1·9	2·3	7·0	0·7	2·0	1·4	4·1	3·1	5·4
1895	5	12	.	.	.	1	1	.	21	38	.	1	.	1	2	.	2	.	2	5
1896	11	6	.	.	.	.	1	2	14	33	.	.	.	.	1	.	.	1	5	7
1897	8	4	.	.	.	.	1	2	26	35	1	1	.	.	3	2	1	.	3	3
1898	7	2	.	.	.	.	1	.	35	66	.	.	.	.	.	1	.	.	3	14
1899	2	4	.	.	.	.	.	1	35	56	1	3	.	1	.	3	.	.	4	11
Absolute Annual Average	6·6	5·6	.	.	.	0·2	0·8	1·0	26·2	45·6	0·4	1·0	.	0·4	1·2	1·2	0·6	0·2	3·4	8·0
Annual Average per 100,000 of Population (Mean of 1891–1901)	7·3	6·2	.	.	.	2·9	2·0	2·5	2·2	3·8	0·7	1·7	.	4·6	4·1	4·1	4·0	1·3	2·8	6·5
1900	5	5	...	...	...	...	...	...	31	69	1	...	1	...	3	1	...	...	1	4
1901	3	4	...	...	...	1	...	..	37	63	1	2	...	...	...	2	...	1	6	7
1902	9	17	...	...	...	...	...	1	39	50	1	1	...	2	1	1	...	...	3	4
1903	4	8	...	1	...	...	1	...	41	61	1	2	...	...	...	3	...	...	3	5
1904	4	9	...	...	3	...	2	...	33	66	...	1	...	2	...	1	...	...	4	2
Absolute Annual Average	5·0	8·6	...	0·2	0·6	0·2	0·6	0·2	36·2	61·8	0·8	1·2	0·2	0·8	0·8	1·6	...	0·2	3·4	4·4
Annual Average per 100,000 of Population (1901)	5·5	9·5	...	0·6	8·6	2·9	1·5	0·5	2·8	4·7	1·2	1·8	2·3	9·2	2·8	5·6	...	1·3	2·8	3·6

Years.	Renfrew.		Ross.		Roxburgh.		Selkirk.		Shetland.		Stirling.		Sutherland.		Wigtown.	
	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.	Priv. Dwel. to Asylums.	Asylums to Priv. Dwel.
1860	1	1	2	.	1	1	.	.	.	.	1	1	1	.	3	.
Absolute Annual Average of the 5 Years (1860–1864)	0·2	0·8	2·8	0·8	1·0	0·4	.	0·4	1·2	0·8	1·2	0·4	0·8	.	1·4	0·2
Annual Average per 100,000 of Population (1861)	0·1	0·5	3·4	1·0	1·8	0·7	.	4·1	3·8	2·5	1·4	0·5	3·3	.	3·3	0·5
Absolute Annual Average of the 5 Years (1865–1869)	1·6	1·8	2·2	0·4	1·6	1·0	0·4	.	0·6	0·4	0·6	0·6	0·4	.	1·0	1·0
Annual Average per 100,000 of Population (Mean of 1861–71)	0·9	1·0	2·7	0·5	2·9	1·8	3·5	.	1·9	1·3	0·7	0·7	1·7	.	2·5	2·5
Absolute Annual Average of the 5 Years (1870–1874)	2·8	3·8	1·2	2·2	0·8	0·4	.	0·2	.	0·4	3·0	7·4	0·6	.	0·8	0·6
Annual Average per 100,000 of Population (1871)	1·4	1·9	1·5	2·7	1·5	0·7	.	1·5	.	1·3	3·2	7·9	2·6	.	2·1	1·5
Absolute Annual Average of the 5 Years (1875–1879)	1·8	3·2	2·0	4·6	0·8	0·8	.	.	0·6	0·8	1·4	2·2	0·6	0·2	0·4	0·6
Annual Average per 100,000 of Population (Mean of 1871–81)	0·9	1·5	2·5	5·7	1·4	1·4	.	.	2·0	2·6	1·4	2·2	2·6	0·9	1·0	1·5
1880	4	3	3	4	1	.	.	.	1	.	2	2	.	.	.	.
1881	1	6	3	1	.	.	.	.	1	.	2	3	.	.	.	.
1882	3	14	4	5	2	.	.	.	2	.	2	1	.	.	.	.
1883	2	1	1	2	1	8	.	2	.	.	3	4	1	.	1	3
1884	.	5	3	6	3	6	.	.	1	1	3	7	2	1	1	8
Absolute Annual Average	2·0	5·8	2·8	3·6	1·4	2·8	.	0·4	1·0	0·2	2·4	3·4	0·6	0·2	0·4	2·2
Annual Average per 100,000 of Population (1881)	0·9	2·6	3·5	4·5	2·3	4·7	.	2·1	3·4	0·7	2·2	3·2	2·7	0·9	1·0	5·7
1885	2	16	1	2	3	4	.	2	.	.	3	7	1	.	.	.
1886	5	5	3	.	3	4	.	1	.	1	5	2	.	1	1	1
1887	3	8	2	6	1	6	.	.	.	1	.	.	.	2	1	1
1888	2	4	5	7	1	5	.	.	.	1	2	3	.	.	3	3
1889	1	18	5	5	.	.	1	.	3	1	4	18	1	2	2	2
Absolute Annual Average	2·6	10·2	3·2	4·0	1·6	3·8	0·2	0·6	0·6	0·8	2·8	6·0	0·4	1·0	1·4	1·4
Annual Average per 100,000 of Population (Mean of 1881–91)	1·0	4·0	4·1	5·1	2·8	6·7	0·9	2·6	2·1	2·7	2·4	5·1	1·8	4·5	3·7	3·7
1890	7	22	2	3	.	1	.	.	1	.	4	4	.	3	1	1
1891	7	8	4	2	.	4	.	.	1	1	7	11	2	1	.	.
1892	3	14	2	7	4	2	.	1	3	1	4	3	1	.	.	.
1893	5	6	2	7	1	3	1	1	1	1	4	3	.	1	1	1
1894	6	17	4	6	3	1	1	4	.	.	4	2	.	2	.	1
Absolute Annual Average	5·6	13·4	2·8	5·0	1·6	2·2	0·4	1·2	1·2	0·6	4·6	5·2	0·6	1·4	0·4	0·6
Annual Average per 100,000 of Population (1891)	2·3	5·5	3·6	6·4	3·0	4·1	1·5	4·4	4·2	2·1	3·9	4·4	2·7	6·4	1·1	1·7
1895	11	10	7	5	.	1	2	.	.	.	2	4	.	.	.	.
1896	5	5	2	3	2	.	.	.	1	.	2	1	1	.	2	.
1897	7	1	4	3	1	1	.	2	.	.	.	1	2	1	.	2
1898	1	2	2	2	.	4	1	.	1	.	1	1	2	2	.	.
1899	6	13	3	3	1	.	1	.	.	.	4	5	1	2	.	1
Absolute Annual Average	6·0	6·2	3·6	3·2	0·8	1·2	0·8	0·4	0·4	.	1·8	2·4	1·2	1·0	0·4	0·6
Annual Average per 100,000 of Population (Mean of 1891–1901)	2·2	2·3	4·6	4·1	1·6	2·3	3·2	1·6	1·4	.	1·4	1·8	5·5	4·6	1·2	1·7
1900	7	3	4	3	1	1	...	...	...	...	2	1	...	1	...	...
1901	4	13	4	5	1	2	...	...	2	...	1	3	1	...	2	...
1902	6	10	4	11	2	1	...	...	...	1	1	4	1	...	2	...
1903	7	3	4	6	2	1	...	1	...	...	3	9	1	...	1	1
1904	4	8	2	5	1	1	1	...	1	...	2	4	...	1	...	...
Absolute Annual Average	5·6	7·4	3·6	6·0	1·4	1·2	0·2	0·2	0·6	0·2	1·8	4·2	0·6	0·4	1·0	0·2
Annual Average per 100,000 of Population (1901)	1·9	2·5	4·7	7·8	2·9	2·5	0·9	0·9	2·1	0·7	1·3	3·0	2·8	1·9	3·1	0·6

The Number of Pauper Lunatics chargeable to each County who were resident in Establishments* or in Private Dwellings respectively on 1st January of each Year from 1861 to 1905.

Populations for 1901	SCOTLAND. 4,472,103	Aberdeen. 313,825		Argyll. 73,642		Ayr. 254,468		Banff. 61,488		Berwick. 30,824		Bute. 18,787		Caithness. 33,370		Clackmannan. 32,029		Dumbarton. 113,365		Dumfries. 72,571		Edinburgh. 488,081		Elgin. 44,800		Fife. 218,940		Forfar. 284,082		Haddington. 38,665		Inverness. 90,674		Kincardine. 31,597		Kinross. 6,981		Kirkcudbright. 39,383		Lanark. 1,314,810		Linlithgow. 66,443		Nairn. 8,721		Orkney. 26,899		Peebles. 15,066		Perth. 123,283		Renfrew. 293,407		Ross. 76,460		Roxburgh. 48,804		Selkirk. 23,356		Shetland 28,166		Stirling. 142,291		Sutherland. 21,440		Wigtown 32,685	
Places in which the Patients were Resident.	Establishments.	Private Dwellings.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.	Estab.	Priv. Dwel.
1861	3470	1787	290	116	90	132	133	122	34	53	29	32	20	20	29	70	21	12	52	17	99	53	529	78	54	34	199	76	329	64	63	37	84	130	53	29	12	6	57	27	580	192	37	11	14	9	16	33	13	8	215	150	153	32	54	130	42	44	8	9	17	26	85	43	18	35	41	47
Absolute Annual Average of the 5 Years, 1861-1865	3617·6	1690·6	301·2	112·0	97·2	120·0	138·0	106·0	44·0	45·2	31·0	29·0	18·6	17·0	36·6	64·6	22·6	9·6	51·8	19·0	98·8	46·4	539·2	79·0	54·0	32·8	189·6	71·8	352·4	64·0	59·0	34·4	81·6	121·2	55·6	24·6	9·8	5·4	62·0	29·0	631·6	106·8	37·4	11·2	13·6	8·4	21·2	34·4	13·2	5·8	218·8	143·8	152·8	29·4	66·0	17·4	46·2	49·6	7·6	7·8	19·0	29·0	85·4	39·6	18·6	32·4	43·2	44·0
Annual Average per 100,000 of Population (calculated on the Populations of 1861)	118	55	135	50	122	151	69	53	76	78	85	79	114	104	87	153	96	41	96	35	130	61	197	29	125	76	122	46	172	31	157	91	92	136	160	71	137	76	146	68	99	17	96	29	163	101	65	106	117	51	164	108	91	17	80	142	85	91	78	80	60	92	96	45	77	134	103	105
Absolute Annual Average of the 5 Years, 1866-1870	4282·8	1521·2	337·6	108·8	136·4	109·2	180·0	89·6	71·0	47·2	38·0	22·2	19·2	16·2	36·2	55·2	28·0	8·0	62·8	18·4	127·4	35·0	582·2	77·8	60·0	33·0	208·6	61·4	410·0	60·6	65·2	27·6	121·4	101·6	58·4	23·2	14·2	7·2	60·6	35·8	738·6	104·4	45·8	10·2	15·2	5·0	22·2	29·8	21·8	2·2	233·2	129·0	175·6	23·4	94·4	25·2	51·8	45·4	9·8	7·8	20·6	28·0	105·8	28·8	20·0	26·8	50·8	47·2
Annual Average per 100,000 of Population (calculated on the Mean of 1861-71)	133	47	145	47	176	141	90	45	118	79	104	61	115	97	88	134	118	34	111	33	169	46	193	26	138	76	132	39	186	27	173	73	137	115	168	7	198	100	144	85	114	15	114	25	164	54	70	94	185	19	179	99	91	12	116	117	96	84	82	66	65	89	113	31	84	112	126	117
Absolute Annual Average of the 5 Years, 1871-1875	5099·0	1454·2	401·2	111·6	151·0	105·8	250·6	80·0	90·8	45·8	47·6	18·0	28·2	16·0	47·2	50·4	33·6	11·8	77·2	17·0	133·8	31·8	624·6	84·4	63·0	33·2	212·0	75·2	492·8	55·8	69·4	19·0	141·4	92·2	64·6	18·0	16·6	9·0	66·4	32·8	965·0	103·8	48·6	8·8	13·8	5·2	21·8	27·8	24·6	5·8	260·4	115·6	216·4	32·4	124·8	32·2	76·2	31·4	13·0	4·6	21·2	27·8	128·8	36·8	22·4	21·4	60·0	42·8
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	149	43	163	45	200	140	125	40	150	75	131	49	166	94	115	123	125	44	126	28	179	42	190	26	145	76	132	47	208	24	184	50	160	104	184	51	257	139	159	78	123	13	117	21	165	62	70	89	201	47	204	91	111	17	152	100	141	58	97	34	67	88	137	39	96	92	155	110
Absolute Annual Average of the 5 Years, 1876-1880	6022·0	1399·4	477·4	92·8	194·4	86·8	324·8	70·8	102·4	42·0	61·6	20·2	45·2	16·8	60·8	58·2	40·4	9·4	101·2	13·8	146·4	28·4	667·6	87·0	74·6	37·8	254·8	78·6	568·8	51·8	76·6	16·2	161·2	102·6	61·0	12·2	21·4	7·2	69·6	22·4	1222·8	98·0	53·4	10·2	14·2	3·8	32·2	33·4	24·4	5·0	287·4	108·0	295·2	30·6	157·0	100·7	97·8	22·6	17·4	2·2	30·4	37·6	166·2	35·8	37·8	23·0	75·6	33·6
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	170	39	186	36	255	114	155	34	168	69	172	56	261	97	150	144	146	34	145	20	194	38	186	24	170	86	153	47	226	21	201	42	180	115	173	35	342	115	166	53	141	11	125	24	165	44	102	105	188	39	224	84	140	15	194	125	172	40	108	14	99	123	165	36	166	101	195	87
1881	6722	1616	542	99	233	72	369	66	114	47	72	21	54	15	70	63	44	8	117	13	156	29	719	89	99	37	304	86	619	52	82	16	190	126	67	12	19	4	62	24	1357	157	62	11	18	2	41	33	23	6	291	125	353	30	173	115	108	18	23	2	33	48	185	32	45	26	78	32
1882	7007	1568	568	98	258	77	356	63	125	49	76	20	58	14	70	69	41	9	123	15	166	27	722	106	94	41	323	90	662	53	100	17	190	139	62	12	21	4	68	23	1431	156	76	11	23	2	41	35	23	5	308	130	371	37	169	113	113	15	21	2	34	48	186	30	44	30	84	33
1883	7017	1693	587	100	255	76	377	65	119	50	73	20	56	14	70	60	40	7	120	14	164	30	706	129	104	41	306	109	677	60	97	15	193	158	60	11	16	6	66	23	1446	200	75	14	19	2	43	39	22	4	295	140	373	47	168	107	116	12	21	1	37	47	183	30	51	29	82	33
1884	7078	1811	584	107	256	91	396	65	123	53	69	26	47	18	76	58	40	7	123	16	142	42	737	152	111	39	307	107	680	59	100	17	191	168	67	10	17	6	62	27	1462	230	70	14	22	2	42	35	21	5	291	139	374	45	173	106	102	18	21	3	46	50	200	34	55	27	71	35
1885	7174	1861	591	103	260	88	402	66	126	51	64	37	49	17	76	57	42	5	122	16	119	43	760	167	117	38	327	105	675	78	111	16	195	178	72	9	17	6	61	24	1515	248	70	16	19	3	47	33	24	5	302	123	377	49	165	103	108	19	19	3	45	48	191	38	60	31	56	38
Absolute Annual Average	6999·6	1689·8	574·4	101·4	252·4	80·8	380·0	65·4	121·4	50·0	70·8	24·8	52·8	15·6	72·4	60·0	41·4	7·2	121·0	14·8	149·4	34·2	726·8	128·6	105·0	39·2	313·4	99·4	662·6	60·4	98·0	16·2	191·8	153·8	65·6	10·8	18·0	5·2	63·8	24·2	1442·2	198·2	70·6	13·2	20·2	2·2	42·8	35·0	22·6	5·0	297·4	131·4	369·6	41·6	169·6	108·8	109·4	16·4	21·0	2·2	39·0	48·2	189·0	32·8	51·0	28·6	74·2	34·2
Annual Average per 100,000 of Population (calculated on the Populations of 1881)	187	45	214	38	329	105	175	30	198	82	201	70	299	88	182	151	144	25	155	19	196	45	187	33	237	89	182	58	249	23	254	42	12	170	185	30	297	86	151	57	153	21	160	30	228	25	134	109	165	36	231	102	164	18	213	137	183	27	112	12	1	162	176	31	228	128	192	89
1886	7248	2058	592	130	272	84	401	72	131	51	65	36	50	17	67	66	38	8	123	18	125	43	724	228	124	37	349	103	632	125	107	19	206	191	67	9	16	7	70	25	1587	283	72	15	21	2	50	34	23	5	309	117	379	62	184	106	105	16	20	5	38	44	179	41	61	28	61	41
1887	7366	2140	585	125	268	80	388	69	133	52	69	36	44	16	75	67	39	5	122	17	126	41	731	232	123	39	350	110	620	138	110	21	190	187	73	8	16	8	73	25	1606	330	73	16	27	2	51	34	23	3	309	119	375	59	189	107	109	13	15	5	41	48	186	35	51	31	66	42
1888	7386	2270	601	126	282	74	397	101	136	50	63	37	51	16	77	71	41	5	114	20	142	38	719	267	122	43	351	115	668	151	114	23	201	192	74	10	16	8	73	25	1653	382	75	16	29	4	51	36	25	4	311	123	387	64	179	112	103	18	18	4	42	50	203	33	47	31	71	41
1889	7600	2297	605	122	287	77	427	97	142	52	63	37	51	15	86	74	43	5	128	19	140	38	729	276	130	46	361	108	626	154	107	20	212	194	73	7	16	8	67	25	1723	379	82	16	24	4	53	34	23	3	332	113	388	68	182	114	104	19	21	6	39	55	213	35	51	36	72	43
1890	7788	2445	626	138	282	88	433	103	139	58	67	29	52	16	77	79	46	6	128	18	141	38	767	299	133	47	365	108	655	152	114	21	232	196	74	6	15	10	72	22	1780	403	84	21	24	3	53	34	26	3	343	123	390	83	181	129	111	20	24	5	54	58	199	49	53	41	70	44
Absolute Annual Average	7457·6	2242·0	601·6	126·2	278·2	80·6	409·0	94·4	136·2	52·6	65·4	35·0	49·6	16·0	76·4	71·4	41·4	5·8	123·0	18·4	134·8	39·6	732·0	260·4	123·6	42·4	355·2	109·6	640·2	142·0	110·4	20·8	208·2	192·0	72·2	8·0	15·8	8·2	71·0	24·0	1669·8	351·4	77·0	16·8	25·0	3·0	51·6	34·4	25·0	3·1	320·8	119·0	383·8	67·2	185·0	113·6	106·4	17·2	19·6	5·0	42·8	51·0	196·0	38·6	52·6	33·4	68·0	42·2
Annual Average per 100,000 of Population (calculated on the Mean of 1881-91)	192	58	21	46	367	106	184	43	217	84	193	103	275	89	198	185	145	20	142	21	179	53	178	63	282	97	198	61	235	52	291	55	232	213	203	22	256	133	173	58	168	35	159	35	265	32	159	106	176	25	252	93	149	26	235	144	187	30	85	22	147	175	168	33	238	151	182	113
1891	7988	2489	617	147	289	97	452	93	130	63	63	31	55	14	89	81	44	6	137	18	160	38	750	297	131	46	385	94	682	156	127	21	242	207	76	7	17	8	76	23	1898	415	85	21	26	4	58	35	28	3	355	125	396	94	178	133	113	17	26	5	50	59	202	50	56	43	75	43
1892	8207	2436	632	145	295	93	460	88	123	64	68	29	57	17	88	79	46	5	139	17	149	37	745	293	137	47	419	88	711	161	127	20	244	206	81	6	19	7	77	19	1938	413	85	16	29	5	64	33	27	2	340	116	390	87	188	136	105	19	29	4	59	59	205	51	61	42	77	40
1893	8318	2519	661	142	298	98	466	96	123	66	69	29	53	20	87	75	44	10	144	17	145	26	754	307	145	48	424	95	679	180	127	18	238	203	81	6	20	6	90	17	1980	427	92	16	28	6	65	36	29	3	335	123	406	95	184	161	118	17	24	6	60	56	213	47	62	38	75	39
1894	8476	2565	661	146	294	100	515	90	135	63	74	33	58	21	91	76	54	6	160	14	141	27	711	348	161	43	423	100	739	180	130	19	266	210	87	6	19	5	90	16	2013	430	96	16	19	6	69	37	29	4	350	111	432	93	162	167	124	17	28	9	62	55	234	43	49	38	74	37
1895	8816	2677	677	145	317	105	533	83	149	68	77	32	61	24	92	79	61	6	170	14	150	28	766	372	152	43	423	99	767	184	130	18	235	218	83	6	19	5	87	18	2073	474	110	14	19	7	76	43	29	4	348	115	490	98	172	174	112	16	40	11	63	54	243	43	50	40	82	37
Absolute Annual Average	8361·0	2537·0	649·6	145·0	298·6	98·6	485·0	90·0	132·0	64·8	70·2	30·8	56·8	19·2	89·4	78·0	49·8	6·6	148·0	16·0	146·0	28·2	745·2	323·4	145·2	45·4	413·4	95·2	713·6	172·2	128·2	19·2	233·0	208·8	81·6	6·2	18·8	6·2	84·0	18·6	1966·4	431·8	93·6	16·4	24·2	5·6	66·4	36·8	28·4	3·4	345·6	118·0	416·8	93·4	176·8	152·2	113·6	17·2	29·4	7·0	58·8	56·6	219·4	46·8	55·6	40·2	76·6	39·2
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	208	63	229	51	398	131	214	40	214	105	217	95	309	104	240	210	150	20	151	16	197	38	172	75	334	104	217	50	257	62	343	51	259	232	230	17	282	93	210	47	180	40	175	31	284	66	218	121	193	23	283	97	170	38	225	193	212	32	108	26	205	197	186	40	254	184	212	109
1896	8957	2700	700	150	322	103	543	83	139	70	77	29	55	27	100	75	61	8	179	13	169	25	742	376	155	38	430	105	762	189	141	17	221	233	77	6	21	5	90	16	2156	491	108	15	27	8	76	41	34	2	353	115	461	92	181	174	110	19	41	7	65	54	243	42	46	38	79	33
1897	9361	2667	712	153	323	101	557	87	143	68	82	29	57	25	102	76	64	9	182	14	169	24	802	375	152	45	446	100	825	175	147	17	237	225	75	6	26	4	89	18	2249	487	110	15	20	6	77	45	31	3	371	114	504	92	193	170	123	16	56	7	58	51	244	44	55	38	80	31
1898	9767	2654	726	143	328	100	569	76	146	69	76	31	55	24	105	80	70	7	200	14	167	27	820	372	158	44	463	95	799	188	142	18	257	220	78	6	28	5	90	16	2437	498	118	12	23	5	74	44	33	2	386	112	526	85	192	173	129	18	40	10	58	51	279	45	54	35	75	29
1899	10,097	2702	780	135	349	100	608	74	150	67	76	31	60	24	108	80	66	9	192	26	169	28	885	370	140	40	490	94	821	196	137	16	275	220	83	6	28	5	90	19	2582	531	112	12	27	5	72	45	33	2	397	118	550	84	200	177	130	23	53	9	62	50	280	42	63	37	74	27
1900	10,331	2703	790	132	349	91	612	72	147	65	84	28	61	18	105	79	63	16	197	28	165	25	937	366	150	40	494	97	816	199	136	17	277	218	84	6	27	6	96	16	2645	585	119	13	31	7	70	44	33	2	400	116	549	88	202	183	142	20	54	7	61	50	296	46	72	38	87	27
Absolute Annual Average	9630·6	2685·2	741·6	142·6	336·2	99·0	576·8	78·4	145·0	67·8	79·0	29·6	57·6	23·6	104·0	78·0	64·8	9·8	190·0	19·0	166·4	25·8	837·2	371·8	150·4	41·4	464·6	98·2	804·6	189·4	140·6	17·0	253·4	223·2	79·4	6·0	26·0	4·6	90·6	17·0	2404·2	508·8	112·8	13·8	25·6	6·2	73·8	44·4	33·4	2·2	381·4	115·0	518·0	88·2	193·6	175·4	126·8	19·2	50·6	8·0	60·8	51·2	268·4	44·0	58·0	37·2	75·0	29·4
Annual Average per 100,000 of Population (calculated on the Mean of 1891-1901)	228	63	247	47	455	134	240	33	235	110	250	94	310	127	293	220	199	30	179	18	226	35	182	81	341	94	227	48	286	67	370	45	279	246	248	19	381	67	226	43	200	42	188	23	297	72	250	150	224	15	311	94	192	33	250	226	246	38	200	32	214	180	206	34	267	171	218	86
1901	10,592	2669	825	122	342	90	597	72	163	71	77	30	57	19	109	81	62	17	191	28	170	28	1039	361	152	39	500	98	840	199	138	18	272	211	77	6	24	4	92	19	2775	569	119	10	33	6	74	40	39	2	388	112	553	79	222	172	147	18	59	7	62	49	293	45	67	38	68	23
1902	10,949	2631	867	120	338	91	606	65	166	66	80	28	57	16	112	77	62	15	211	29	170	28	1031	343	145	37	493	90	847	195	145	12	290	209	81	6	23	4	91	20	2938	592	128	11	32	6	78	47	34	3	401	107	564	88	227	171	149	18	60	5	74	48	288	43	66	36	71	21
1903	11,324	2642	913	120	327	90	629	61	171	65	82	26	64	18	118	76	71	14	216	32	161	22	1121	337	142	35	517	96	870	194	151	14	291	214	79	6	24	4	96	18	3073	531	130	13	34	10	75	46	39	1	404	101	578	90	227	179	152	23	62	6	74	48	293	48	66	36	75	20
1904	11,404	2658	928	117	338	87	623	59	166	68	87	26	64	16	105	78	69	16	212	37	164	25	1169	338	147	29	523	100	849	199	159	13	308	225	75	7	24	4	94	16	3065	585	119	13	32	10	72	46	40	1	403	105	592	92	243	181	164	22	54	7	68	43	294	52	74	33	79	21
1905	11,700	2704	985	119	346	86	616	55	176	69	96	26	70	17	94	78	72	13	216	40	164	24	1231	328	148	32	541	100	786	219	163	12	302	236	78	7	26	4	92	12	3247	614	122	15	30	13	72	45	39	1	402	99	607	84	255	186	155	21	59	6	71	42	291	58	70	32	80	30
Absolute Annual Average	11,194·0	2660·8	903·6	119·6	338·0	88·8	614·2	62·4	167·8	67·6	84·4	27·0	63·2	16·8	106·6	77·4	67·2	15·0	209·2	33·2	165·8	23·2	1128·2	340·4	146·8	34·4	517·8	96·8	840·8	199·6	147·4	13·8	292·6	219·0	78·0	6·4	24·2	3·4	92·0	17·0	3010·6	586·2	104·8	578·8	84·6	23·4	177·8	153·4	20·4	58·8	6·2	69·8	46·0	289·8	49·2	68·6	35·0	74·8	21·0
Annual Average per 100,000 of Population (calculated on the Populations of 1901)	250	59	288	38	459	121	241	25	273	110	274	88	336	89	315	229	210	47	184	29	228	32	231	70	328	77	237	44	296	70	381	36	323	242	247	20	347	49	234	43	229	45	186	19	369	103	259	156	254	11	323	85	197	29	307	233	314	42	252	27	248	163	204	35	320	163	229	64

*Inmates of Schools for Imbeciles are not included in this Table.

TABLE showing the Number of Private and Pauper Lunatics of each Sex in each Royal and District Asylum, Parochial Asylum, and Licensed Poorhouse in Scotland, on 1st January 1905; and the Number of Pauper Lunatics from each County in each Public Asylum, Private Asylum, Parochial Asylum, or Poorhouse.

COUNTY IN WHICH THE PARISH OF SETTLEMENT IS SITUATED.

Asylum.	Where Situated.	Name of Superintendent.	Number of Patients. Private.		Number of Patients. Pauper.		Aberdeen.		Argyll.		Ayr.		Banff.		Berwick.		Bute.		Caithness.		Clackmannan.		Dumbarton.		Dumfries.		Edinburgh. Urban District.		Edinburgh. Mid-lothian.		Elgin.		Fife.		Forfar.		Haddington.		Inverness.		Kincardine.		Kinross.		Kirkcudbright.		Lanark.		Linlithgow.		Nairn.		Orkney.		Peebles.		Perth.		Renfrew.		Ross.		Roxburgh.		Selkirk.		Shetland.		Stirling.		Sutherland.		Wigtown.	
			M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Aberdeen Royal Asylum	Aberdeen	Dr Reid	128	145	288	321	286	317	...	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Crichton Royal Institution	Dumfries	Dr Rutherford	223	246	146	169	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	78	86	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	41	51	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	27	32
Dundee Royal Asylum	Dundee	Dr T. Mackenzie	31	38	...		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Edinburgh Royal Asylum	Edinburgh	Dr Clouston	172	182	208	256	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	185	233	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	21	21	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Glasgow Royal Asylum	Glasgow	Dr Oswald	179	236	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Montrose Royal Asylum	Montrose	Dr Havelock	51	81	256	290	...	...	...	...	1	...	...	...	...	...	...	...	42	48	...	...	...	...	...	...	...	...	...	...	...	...	...	...	157	165	...	...	...	...	23	38	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	33	38	...	...	...	...	...	...
Murray's Royal Asylum	Perth	Dr Urquhart	69	66	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Aberdeen District Asylum	Kingseat	Dr Angus	...	...	146	156	146	156	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Argyll District Asylum	Lochgilphead	Dr Cameron	14	14	204	218	...	...	172	173	...	...	...	...	...	...	31	39	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Ayr District Asylum	Ayr	Dr Easterbrook	...	...	249	259	...	...	...	...	248	258	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Banff District Asylum	Ladysbridge	Mr Fowler	3	...	83	94	1	2	...	...	...	...	82	91	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Dundee District Asylum	Westgreen	Dr T. Mackenzie	...	...	166	210	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	13	...	...	...	...	...	1	164	196	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Edinburgh District Asylum	Bangour	Dr Keay	...	...	99	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	99	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Elgin District Asylum	Elgin	Mr Hendry	4	6	68	96	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	66	82	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	13	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fife District Asylum	Cupar-Fife	Dr Turnbull	1	9	277	285	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	269	267	...	...	...	...	...	...	...	...	8	18	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Glasgow District Asylum	Gartloch	Dr Parker	...	...	357	321	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	357	321	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
" " "	Lenzie	Dr Marr	...	...	500	440	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	500	440	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Govan District Asylum	Hawkhead	Dr Watson	7	8	294	221	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	291	217	...	...	...	...	...	...	...	...	...	1	2	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Haddington District Asylum	Haddington	Mr Macrae	3	7	68	82	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	68	82	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Inverness District Asylum	Inverness	Dr Campbell	5	3	338	319	...	1	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	2	2	...	...	...	...	...	...	...	1	...	...	161	135	...	...	...	...	...	...	...	1	...	...	13	17	...	...	...	...	1	1	...	...	129	121	...	...	...	...	...	...	...	...	31	39	...	...
Kirklands District Asylum	Bothwell	Dr Skeen	...	...	113	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	99	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lanark District Asylum	Hartwood	Dr Kerr	34	47	411	407	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	8	47	...	1	...	...	...	...	2	...	...	1	...	...	...	...	...	...	...	...	358	310	...	...	...	...	7	...	...	...	...	...	35	47	...	...	...	...	1	...	...	...	...	...	...	...	...	...
Midlothian District Asylum	Rosewell	Dr Mitchell	18	36	152	144	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	9	13	121	111	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	20	19	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Perth District Asylum	Murthly	Dr Bruce	...	...	187	187	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	184	183	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...
Roxburgh District Asylum	Melrose	Dr Johnstone	8	13	139	171	...	...	...	...	...	...	...	...	47	49	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	70	85	22	36	...	...	...	...	...	...	...	...
Stirling District Asylum	Larbert	Dr Robertson	30	14	335	300	...	...	...	...	1	...	...	...	...	...	...	...	...	...	36	32	82	74	...	...	1	21	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	56	41	...	...	4	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	155	129	...	...	...	...
Totals in Royal and District Asylums			980	1151	5086	5147	434	479	172	173	250	258	83	92	47	49	31	39	44	49	37	32	83	74	78	86	323	434	121	112	66	82	271	270	323	362	68	83	162	140	24	40	8	18	41	51	1606	1390	56	41	13	17	33	39	20	19	185	185	37	48	131	124	70	85	23	36	33	38	155	130	31	39	27	33
Mavisbank	Polton	Dr Wilson	20	25	...		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Saughton Hall	Gorgie	Sir John Batty Tuke	20	44	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Westermains	Kirkintilloch	Mr Lawrie	2	12	...		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals in Private Asylums			42	81	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Greenock Parochial Asylum	Greenock	Mr Houston	...	...	128	116	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	128	116	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Paisley Parochial Asylum, Craw Road	Paisley	Mr Black	...	...	36	48	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	36	48	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Paisley Parochial Asylum, Riccartsbar	Do.	Mr Pirie	...	...	90	102	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	88	101	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals in Parochial Asylums (Lunatic Wards of Poorhouses with Unrestricted Licences)			...	...	254	266	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	252	265	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Buchan Poorhouse	New Maud	Mr Fraser	...	...	26	26	26	26	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cunninghame Poorhouse	Irvine	Mr Lockhart	...	...	47	47	...	...	...	...	46	47	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dumbarton Poorhouse	Dumbarton	Mr M'Callum	...	...	30	32	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	29	29	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dundee East Poorhouse	Dundee	Mr Chisholm	...	...	48	47	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	48	47	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...
Edinburgh Poorhouse	Edinburgh	Mr Bennett	...	...	136	85	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	136	85	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Govan Poorhouse	Glasgow	Mr Thomson	...	...	99	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	99	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Inveresk Poorhouse	Inveresk	Mr Thom	...	...	14	14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	5	7	2	...	...	...	...	...	...	5	7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Kincardine Poorhouse	Stonehaven	Mr Hall	...	...	19	21	11	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	2	...	...	...	...	4	10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Linlithgow Poorhouse	Linlithgow	Mr Johnstone	...	...	19	16	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	17	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Old Monkland Poorhouse	Coatbridge	Mr Young	...	...	25	25	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	25	18	...	...	...	...	...	...	...	...	...	1	...	5	...	...	...	...	...	...	...	...	1	2	...	...	...	...
Perth Poorhouse	Perth	Mr Laird	...	...	18	18	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	4	...	...	...	...	...	...	...	...	17	14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wigtown Poorhouse	Stranraer	Mr Ormiston	...	...	20	15	...	...	...	...	10	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10	10
Totals in Poorhouses with Restricted Licences			...	...	501	446	37	35	...	...	56	52	...	...	...	...	...	...	...	1	1	2	29	29	...	...	138	91	7	4	...	...	...	...	52	49	5	7	...	...	4	10	...	...	...	...	127	123	17	8	...	...	...	...	...	...	17	15	...	5	...	...	...	...	...	...	...	...	1	5	...	...	10	10
GENERAL TOTALS			1022	1232	5841	5859	471	514	172	173	306	310	83	92	47	49	31	39	44	50	38	34	113	103	78	86	461	526	128	116	66	82	271	270	375	411	73	90	162	140	28	50	8	18	41	51	1734	1513	73	49	13	17	33	39	20	19	202	200	289	318	131	124	70	85	23	36	33	38	156	135	31	39	37	43

Return showing the Number of Pauper Lunatics of each Sex chargeable to each County in Scotland on 1st January 1905, and the manner of their disposal.

COUNTIES.	Population in 1901.	Number of Pauper Lunatics at 1st January 1905.			DISPOSAL OF PAUPER LUNATICS.											
					In Establishments.						In Private Dwellings and under sanction of the Board.					
					In Asylums and in Wards of Poorhouses with Unrestricted Licences.			In Wards of Poor-houses with Restricted Licences.			With Relatives, and Alone.			With Strangers.		
		M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Aberdeen, { Aberdeen City Dist.,	313,825	230	229	459	219	208	427	...	...	...	2	3	5	9	18	27
Aberdeen County Dist., }		290	355	645	215	271	486	37	35	72	20	20	40	18	29	47
2. Argyll,	73,642	212	219	431	172	173	345	...	...	...	17	22	39	23	24	47
3. Ayr,	254,468	327	344	671	250	258	508	56	52	108	15	16	31	6	18	24
4. Banff,	61,488	112	132	244	83	92	175	...	...	...	15	17	32	14	23	37
5. Berwick,	30,824	60	61	121	47	49	96	...	...	...	6	8	14	7	4	11
6. Bute,	18,787	34	53	87	31	39	70	...	...	...	...	3	3	3	11	14
7. Caithness,	33,870	78	94	172	44	49	93	...	1	1	26	26	52	8	18	26
8. Clackmannan,	32,029	43	42	85	37	32	69	1	2	3	...	4	4	5	4	9
9. Dumbarton,	113,865	125	131	256	84	74	158	29	29	58	2	3	5	10	25	35
10. Dumfries,	72,571	91	97	188	78	86	164	...	...	...	6	4	10	7	7	14
11. Edinburgh, { Edinburgh Dist.,	488,061	584	699	1,283	323	435	758	138	91	229	14	18	32	109	155	264
Mid-Lothian Dist., }		137	134	271	121	112	233	7	4	11	8	9	17	1	9	10
12. Elgin (or Moray),	44,800	78	102	180	66	82	148	...	...	...	8	9	17	4	11	15
13. Fife,	218,840	309	332	641	271	270	541	...	...	...	11	12	23	27	50	77
14. Forfar, { Dundee Dist.,	284,082	264	355	619	172	206	378	47	46	93	2	7	9	43	96	139
Forfar Dist., }		181	205	386	151	156	307	5	3	8	15	17	32	10	29	39
15. Haddington,	38,665	78	97	175	68	83	151	5	7	12	3	6	9	2	1	3
16. Inverness,	90,674	273	265	538	162	140	302	...	...	...	75	79	154	36	46	82
17. Kincardine,	31,537	32	53	85	24	40	64	4	10	14	1	2	3	3	1	4
18. Kinross,	6,981	8	19	27	8	18	26	...	...	...	...	...	...	...	1	1
19. Kirkcudbright,	39,383	43	61	104	41	51	92	...	...	...	2	6	8	...	4	4
20. Lanark, { Glasgow Dist.,	1,314,810	988	1,012	2,000	857	762	1,619	...	...	...	9	18	27	122	232	354
Govan Dist.,		519	437	956	346	262	608	103	106	209	9	22	31	61	47	108
Lanark Dist., }		467	438	905	404	366	770	24	17	41	22	24	46	17	31	48
21. Linlithgow,	66,443	80	57	137	56	41	97	17	8	25	3	6	9	4	2	6
22. Nairn,	8,721	22	21	43	13	17	30	...	...	...	3	2	5	6	2	8
23. Orkney,	28,699	55	62	117	33	39	72	...	...	...	13	13	26	9	10	19
24. Peebles,	15,066	20	20	40	20	19	39	...	...	...	...	1	1	...	...	...
25. Perth,	123,283	253	248	501	185	185	370	17	15	32	17	11	28	34	37	71
26. Renfrew,	293,497	328	363	691	289	313	602	...	5	5	2	4	6	37	41	78
27. Ross and Cromarty,	76,450	219	222	441	131	124	255	...	...	...	68	72	140	20	26	46
28. Roxburgh,	48,804	77	99	176	70	85	155	...	...	...	4	9	13	3	5	8
29. Selkirk,	23,356	26	39	65	23	36	59	...	...	...	2	2	4	1	1	2
30. Shetland,	28,166	53	60	113	33	38	71	...	...	...	17	18	35	3	4	7
31. Stirling,	142,291	172	177	349	155	130	285	1	5	6	5	13	18	11	29	40
32. Sutherland,	21,440	40	62	102	31	39	70	...	...	...	7	20	27	2	3	5
33. Wigtown,	32,685	47	53	100	27	33	60	10	10	20	8	6	14	2	4	6
Totals,	4,472,103	6,955	7,449	14,404	5,340	5,413	10,753	501	446	947	437	532	969	677	1,058	1,735

APPENDIX A.—TABLE XVII.

The Manner in which the Pauper Lunatics chargeable to each County, placed on the Register of the Board during 1904, were disposed of, and the Changes that have taken place during the year in the Disposal of those on the Register on 1st January of that year.

COUNTIES.	No. of Pauper Lunatics at 1st January 1904.				Number intimated during the Year 1904.		A. Disposal of Establishment Patients.*										B. Disposal of Single Patients.									
	In Establishments.		In Private Dwellings as Single Patients.				Placed in Establishments.				Discharged from Establishments.				Died.		Exempted from Removal of Single Patients intimated.		Transferred from Establishments.		Removed from Jurisdiction of Board.				Died.	
							Of Patients intimated during 1904.		Of Single Patients transferred.		Recovered.		Removal from Poor-Roll.								By Recovery.		By Friends.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Aberdeen	452	476	44	73	112	112	109	108	1	2	44	47	9	8	29	21	3	4	5	2	1	1	...	1	1	5
2. Argyll	169	169	39	48	22	27	22	26	...	1	12	8	1	5	3	10	...	1	2	2	...	...	1	...	...	5
3. Ayr	306	317	23	36	67	63	65	62	2	2	28	27	9	4	31	36	2	1	1	1	...	...	...	...	2	2
4. Banff	85	81	27	41	20	21	19	20	...	1	13	2	4	1	3	2	1	1	2	3	1	...	...	...	2	3
5. Berwick	41	46	13	13	13	10	13	10	...	...	2	3	...	...	5	4	...	...	...	...	...	...	...	...	...	1
6. Bute	29	35	3	13	4	8	4	7	...	...	...	...	...	1	2	2	...	1	...	...	...	...	...	...	...	...
7. Caithness	49	56	32	43	6	14	5	10	1	1	3	4	...	3	5	6	1	4	4	4	...	1	...	1	2	3
8. Clackmannan	36	33	6	10	11	8	11	8	1	...	4	2	...	...	6	5	...	...	...	...	...	...	...	1	...	1
9. Dumbarton	113	99	9	28	51	29	48	28	1	1	22	11	9	6	10	8	3	1	1	...	...	...	...	...	...	...
10. Dumfries	77	87	13	12	16	11	15	11	...	1	8	8	3	2	3	5	1	...	...	...	...	...	...	...	1	...
11. Edinburgh—																										
Urban District	446	489	133	185	135	187	132	187	8	8	47	63	24	21	44	67	3	...	8	7	3	1	1	4	7	8
Midlothian	126	108	6	14	28	31	26	29	...	...	10	7	2	2	10	12	2	2	1	2	...	...	...	...	...	1
12. Elgin	69	78	11	18	20	19	19	15	...	1	8	3	5	5	11	6	1	4	...	...	...	...	...	...	...	1
13. Fife	267	261	39	61	53	59	53	59	1	3	16	19	12	11	21	16	...	...	2	8	...	1	...	...	2	3
14. Forfar	396	453	60	139	84	86	80	81	8	9	43	52	7	4	43	47	4	5	19	29	2	4	...	2	1	9
15. Haddington	69	90	5	8	16	10	16	10	...	1	5	7	...	1	8	5	...	...	...	...	...	...	...	...	...	...
16. Inverness	156	152	103	122	54	43	42	33	2	2	24	30	3	...	10	8	12	10	4	5	...	1	2	2	5	5
17. Kincardine	29	46	4	3	5	11	5	11	...	...	5	4	...	...	1	2	...	...	...	...	...	...	...	...	...	...
18. Kinross	5	19	2	2	3	1	3	1	2	1	1	1	...	1	1	1	...	...	...	...	...	...	...	...	...	...
19. Kirkcudbright	38	52	3	13	9	4	9	4	...	2	2	4	2	...	1	3	...	...	...	...	...	1	...	...	...	...
20. Lanark	1620	1445	230	355	559	491	548	479	17	16	205	196	48	39	160	152	11	12	33	33	7	2	2	3	8	7
21. Linlithgow	77	42	6	7	16	21	15	21	...	...	8	6	2	...	9	6	1	...	...	1	...	...	...	...	...	...
22. Nairn	16	16	7	3	1	4	1	3	...	...	...	1	...	...	2	2	...	1	2	...	...	...	...	...	...	...
23. Orkney	33	39	21	25	6	7	5	7	...	...	1	2	...	...	4	4	1	...	...	1	...	...	...	...	...	...
24. Peebles	20	20	...	1	4	2	4	2	...	...	2	3	...	...	3	...	...	...	...	...	...	...	...	...	...	...
25. Perth	191	212	54	51	35	47	34	45	3	1	10	26	2	5	12	24	1	2	...	2	1	...	...	...	1	6
26. Renfrew	287	305	37	45	92	105	90	104	3	1	51	47	4	7	31	36	2	1	3	5	...	1	...	...	1	3
27. Ross & Cromarty	124	119	87	94	25	36	21	30	1	1	10	22	...	...	5	7	4	6	2	3	...	...	1	...	3	4
28. Roxburgh	72	92	7	15	13	9	13	8	...	1	5	7	2	1	9	6	...	1	...	1	...	1	...	...	...	1
29. Selkirk	19	35	3	4	12	7	12	7	...	1	4	2	...	...	4	4	...	...	...	...	...	...	...	...	...	...
30. Shetland	31	37	20	23	11	7	9	7	1	...	5	1	...	...	3	5	2	...	...	...	...	...	...	...	...	...
31. Stirling	156	138	12	40	54	48	51	46	1	1	26	22	7	8	16	18	3	2	3	1	...	...	...	...	1	1
32. Sutherland	36	38	9	24	4	8	4	7	...	...	2	5	...	1	6	...	...	1	1	...	1	...	...	...	1	...
33. Wigtown	39	40	9	12	3	12	2	12	...	...	1	4	2	1	2	4	1	...	...	...	...	...	...	...	...	1
TOTALS	5679	5725	1077	1581	1564	1558	1505	1498	53	58	627	646	157	137	513	534	59	60	93	110	16	14	7	15	39	74

* Inmates of Schools for Imbeciles are not included in this Table.

APPENDIX A.—Table XVIII.

Proportion for each County, per 100,000 of Population, of Pauper Lunatics annually placed on the Register in the Years 1895-1904, also of those at 1st January 1905 in Asylums, Lunatic Wards of Poorhouses, and in Private Dwellings and the Proportion of Registered Paupers of all classes.

COUNTIES.	Proportion per 100,000 of Population.*								
	Average number intimated as Pauper Lunatics during the years 1895–1904.			Total number of Pauper Lunatics at 1st Jan. 1905.	Pauper Lunatics in Establishments at 1st Jan. 1905.			Pauper Lunatics in Private Dwellings at 1st Jan. 1905.	Paupers of all Classes at 15th May 1904.
	Sent to Asylums.	Left in Private Dwellings.	Total.		In Asylums and in Wards of Poorhouses with Unrestricted Licences.	In Wards of Poorhouses with Restricted Licences.	Total in Establishments.		
1. Aberdeen,	57	2	59	352	291	23	314	38	1538
2. Argyll,	69	4	73	585	468	...	468	117	2223
3. Ayr,	55	1	56	264	200	42	242	22	1387
4. Banff,	53	6	59	397	285	...	285	112	1722
5. Berwick,	41	3	44	393	312	...	312	81	1389
6. Bute,	57	1	58	463	373	...	373	90	1277
7. Caithness,	49	16	65	508	275	3	278	230	2669
8. Clackmannan,	51	2	53	265	216	9	225	41	1133
9. Dumbarton,	57	1	58	225	139	51	190	35	1314
10. Dumfries,	47	1	48	259	226	...	226	33	1383
11. Edinburgh,	70	2	72	318	203	49	252	66	1432
12. Elgin,	80	5	85	402	330	...	330	72	2221
13. Fife,	49	2	51	293	247	...	247	46	1115
14. Forfar,	68	2	70	354	241	36	277	77	1566
15. Haddington,	76	3	79	453	391	31	422	31	1640
16. Inverness,	79	17	96	593	333	...	333	260	2742
17. Kincardine,	53	...	53	270	203	45	248	22	1069
18. Kinross,	64	3	67	387	372	...	372	14	731
19. Kirkcudbright,	41	3	44	264	234	...	234	30	1747
20. Lanark,	64	2	66	294	228	19	247	47	1624
21. Linlithgow,	47	1	48	206	146	38	184	23	1246
22. Nairn,	92	7	99	493	344	...	344	149	2007
23. Orkney,	42	12	54	408	251	...	251	157	2108
24. Peebles,	47	1	48	265	259	...	259	7	969
25. Perth,	70	1	71	406	300	26	326	80	1289
26. Renfrew,	64	1	65	235	205	2	207	29	1266
27. Ross and Cromarty,	64	14	78	577	334	...	334	243	3105
28. Roxburgh,	57	3	60	361	318	...	318	43	1270
29. Selkirk,	71	2	73	278	253	...	253	26	1066
30. Shetland,	46	9	55	401	252	...	252	149	2695
31. Stirling,	63	1	64	245	200	4	204	41	1373
32. Sutherland,	75	8	83	476	326	...	326	149	3349
33. Wigtown,	45	4	49	306	184	61	245	61	2258
Scotland,	62	3	65	322	241	21	262	60	1574

* Calculated on Populations of 1901.

APPENDIX A.—Table XIX.

Return exhibiting the Number of Orders granted by the Sheriffs for Admission of Lunatics into any Public, Private, District, or Parochial Asylum or House, stating the Asylum or House to which such Order was sent, during the Year ended 31st December 1904.

Orders granted by the Sheriffs of the County of	For the Admission of Patients into the Asylum or House of	No. of Orders Granted.	Total.
1. Aberdeen	Royal Asylum, Aberdeen	197	
	Do. Montrose	3	
	District Asylum, Aberdeen	225	
			425
2. Argyll	Royal Asylum, Glasgow	1	
	District Asylum, Argyll	47	
	Do. Inverness	1	
			49
3. Ayr	Crichton Royal Institution, Dumfries	4	
	Royal Asylum, Glasgow	1	
	District Asylum, Ayr	130	
	Private Asylum, Westermains	1	
			136
4. Banff	Royal Asylum, Aberdeen	1	
	District Asylum, Banff	36	
			37
5. Berwick	District Asylum, Roxburgh	11	
			11
6. Bute	Crichton Royal Institution, Dumfries	1	
	Royal Asylum, Glasgow	1	
	District Asylum, Argyll	11	
			13
7. Caithness	Royal Asylum, Montrose	14	
			14
8. Clackmannan	District Asylum, Stirling	9	
			9
9. Dumbarton	District Asylum, Glasgow (Woodilee)	3	
	Do. Stirling	35	
	Private Asylum, Westermains	2	
			40
10. Dumfries	Crichton Royal Institution, Dumfries	119	
	Private Asylum, Mavisbank	1	
			120
11. Edinburgh	Crichton Royal Institution, Dumfries	1	
	Royal Asylum, Edinburgh	413	
	Murray's Royal Asylum, Perth	1	
	District Asylum, Midlothian	75	
	Private Asylum, Mavisbank	16	
	Do. Saughton Hall	4	
			510
12. Elgin	Royal Asylum, Aberdeen	1	
	District Asylum, Banff	1	
	Do. Elgin	39	
			41
13. Fife	Royal Asylum, Dundee	1	
	Do. Montrose	1	
	Murray's Royal Asylum, Perth	4	
	District Asylum, Fife	113	
	Do. Lanark	1	
	Do. Midlothian	1	
			121
14. Forfar	Royal Asylum, Aberdeen	1	
	Royal Asylum, Dundee	8	
	Do. Montrose	99	
	District Asylum, Dundee	128	
			236
15. Haddington	District Asylum, Haddington	24	
			24
16. Inverness	Murray's Royal Asylum, Perth	1	
	District Asylum, Inverness	105	
			106
	Carry Forward		1,892

APPENDIX A.—TABLE XIX.—*continued.*

Orders granted by the Sheriffs of the County of	For the Admission of Patients into the Asylum or House of	No. of Orders Granted.	Total.
	Brought Forward .	.	1,892
17. Kincardine . . .	Royal Asylum, Aberdeen	2	
	Do. Montrose	8	
			10
18. Kinross	District Asylum, Fife	4	
			4
19. Kirkcudbright . .	Crichton Royal Institution, Dumfries . .	2	
			2
20. Lanark . . .	Crichton Royal Institution, Dumfries . .	3	
	Royal Asylum, Glasgow	103	
	Do. Montrose	1	
	Murray's Royal Asylum, Perth . . .	1	
	District Asylum, Argyll	1	
	Do. Glasgow (Gartloch) . . .	253	
	Do. Glasgow (Woodilee) . .	287	
	Do. Govan	291	
	Kirklands Asylum, Bothwell	71	
	District Asylum, Lanark	173	
	Do. Stirling	4	
	Private Asylum, Saughton Hall . . .	1	
	Parochial Asylum, Paisley (Riccartsbar) . .	6	
			1,195
21. Linlithgow . . .	District Asylum, Stirling	16	
			16
22. Nairn	District Asylum, Inverness	5	
			5
23. Orkney	Royal Asylum, Edinburgh	12	
			12
24. Peebles	District Asylum, Midlothian	2	
	Do. Roxburgh	1	
			3
25. Perth	Murray's Royal Asylum, Perth . . .	29	
	District Asylum, Ayr	1	
	Do. Dundee	2	
	Do. Glasgow (Woodilee) . .	1	
	Do. Perth	82	
			115
26. Renfrew	Crichton Royal Institution, Dumfries . .	2	
	Royal Asylum, Glasgow	2	
	District Asylum, Glasgow (Woodilee) . .	1	
	Do. Govan	1	
	Do. Lanark	17	
	Parochial Asylum, Greenock	73	
	Do. Paisley (Craw Road) . .	7	
	Do. Do. (Riccartsbar) . .	98	
			201
27. Ross	District Asylum, Inverness	29	
			29
28. Roxburgh . . .	Crichton Royal Institution, Dumfries . .	2	
	District Asylum, Roxburgh	47	
			49
29. Selkirk	District Asylum, Roxburgh	2	
			2
30. Shetland . . .	Royal Asylum, Montrose	15	
			15
31. Stirling	Royal Asylum, Aberdeen	1	
	Do. Edinburgh	1	
	Do. Glasgow	2	
	District Asylum, Glasgow (Woodilee) . .	11	
	Do. Midlothian	1	
	Do. Stirling	174	
			190
32. Sutherland . . .	District Asylum, Inverness	3	
			3
33. Wigtown	Crichton Royal Institution, Dumfries . .	12	
	District Asylum, Ayr	1	
			13
	TOTAL, .		3,756

APPENDIX A.—Table XX.

Return exhibiting the Number of Licences granted by the General Board of Commissioners in Lunacy for Scotland, for the Continuance, Establishment, or Renewal of Charitable Institutions, Private Asylums, and Lunatic Wards of Poorhouses, and the Transfer of any such Licence from any one Asylum to another, during the year ended 31st December 1904.

Name.	Number of Licences granted for Continuance or Renewal.	Number of Licences granted for Establishment.	Number of Licences Transferred.	Total.
1. Charitable Institutions . . .	2	...	...	2
2. Private Asylums	3	...	...	3
3. Lunatic Wards of Poorhouses . .	18	...	...	18
Total	23	...	...	23

APPENDIX A.—TABLE XXI.

Average Number of Patients Resident, and the Results of Treatment in each Asylum or other Establishment, for the Year 1904.

(a) *Royal and District Asylums.*

ROYAL AND DISTRICT ASYLUMS.	Average Number Resident.		Admissions (including Transfers).		Recoveries.		Discharges not Recovered (including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Aberdeen Royal Asylum, Private patients,	130·5	142·5	35	41	21	22	6	7	14	6	60·0	53·7	10·7	4·2
1. Aberdeen Royal Asylum, Pauper do.	318·0	348·0	78	80	30	35	85	87	22	13	38·5	43·8	6·9	3·7
1. Aberdeen Royal Asylum, Total,	448·5	490·5	113	121	51	57	91	94	36	19	45·1	47·1	8·0	3·9
2. Aberdeen District Asylum,	*140·5	149·0	167	177	12	11	3	4	6	6	7·2	6·2	4·3	4·0
3. Argyll District Asylum,	215·0	229·5	27	37	10	9	5	9	6	14	37·0	24·3	2·8	6·1
4. Ayr District Asylum,	249·5	263·5	73	67	29	27	20	15	25	34	39·7	40·3	10·0	12·9
5. Banff District Asylum,	87·0	88·5	24	21	15	4	8	4	3	2	62·5	19·0	3·4	2·3
6. Crichton Royal Institution, Dumfries, Private patients,	222·5	238·5	50	46	29	12	5	8	16	11	58·0	26·1	7·2	4·6
6. Crichton Royal Institution, Dumfries, Pauper do.	145·0	169·0	29	30	11	16	10	2	5	12	37·9	53·3	3·4	7·1
6. Crichton Royal Institution, Dumfries, Total,	367·5	407·5	79	76	40	28	15	10	21	23	50·6	36·8	5·7	5·6
7. Dundee Royal Asylum,	23·5	28·0	21	27	2	2	1	3	3	2	9·5	7·4	12·8	7·1
8. Dundee District Asylum,	169·5	225·0	71	70	29	36	21	44	28	20	40·8	51·4	16·5	8·9
9. Edinburgh Royal Asylum, Private patients,	169·0	178·0	45	53	18	26	7	12	14	12	40·0	49·0	8·3	6·7
9. Edinburgh Royal Asylum, Pauper do.	245·5	275·0	144	203	42	56	134	124	39	56	29·2	27·6	16·0	20·4
9. Edinburgh Royal Asylum, Total,	412·5	453·0	189	256	60	82	141	136	53	68	31·7	32·0	12·8	15·0
10. Edinburgh District Asylum,	†77·5	92·5	103	102	...	...	3	1	1	1	...	...	1·3	1·1
11. Elgin District Asylum,	73·0	100·5	24	18	9	4	4	3	13	8	37·5	22·2	17·8	8·0
12. Fife District Asylum,	276·5	292·5	62	66	18	24	18	22	23	17	29·0	36·4	8·3	5·8
13. Glasgow Royal Asylum,	179·0	241·5	67	46	20	18	26	27	17	10	29·9	39·1	9·5	4·1
14. Glasgow District Asylum, Gartloch,	346·0	312·5	130	141	35	51	39	40	34	33	26·9	36·2	9·8	10·6
15. Glasgow District Asylum, Woodilee,	475·0	427·5	183	149	54	53	36	35	43	36	29·5	35·6	9·1	8·4
16. Govan District Asylum,	282·0	219·5	171	144	58	63	38	21	37	41	33·9	43·8	13·1	18·7
17. Haddington District Asylum,	70·5	90·0	17	13	4	7	2	2	10	6	23·5	53·8	14·2	6·7
18. Inverness District Asylum,	341·0	326·0	74	77	32	54	13	12	25	19	43·2	70·1	7·3	5·8
19. Kirklands Asylum at Bothwell,	112·5	102·0	46	29	24	7	9	12	12	14	52·2	24·1	10·7	13·7
20. Lanark District Asylum,	447·0	445·5	106	105	47	47	25	8	38	33	44·3	44·8	8·5	7·4
21. Midlothian District Asylum,	167·5	176·0	47	44	14	14	11	9	17	13	29·8	31·8	10·1	7·3
22. Montrose Royal Asylum, Private patients,	51·0	78·0	13	22	1	10	7	2	5	2	7·7	45·5	9·8	2·6
22. Montrose Royal Asylum, Pauper do.	254·5	291·0	57	56	24	21	8	6	22	33	42·1	37·5	8·6	11·3
22. Montrose Royal Asylum, Total,	305·5	369·0	70	78	25	31	15	8	27	35	35·7	39·7	8·8	9·5
23. Murray's Royal Asylum, Perth,	72·0	61·5	19	21	2	3	15	5	8	4	10·5	14·3	11·1	6·5
24. Perth District Asylum,	181·5	192·5	44	49	12	27	13	10	8	23	27·3	55·1	4·4	11·9
25. Roxburgh District Asylum,	143·0	185·5	41	29	12	14	2	2	19	16	29·3	48·3	13 3	8·6
26. Stirling District Asylum,	367·5	314·0	152	108	67	39	47	31	43	38	44·1	36·1	11·7	12·1
GENERAL RESULTS,	6030·5	6283·0	2120	2071	681	712	621	567	556	535	32·1	34·4	9·2	8·5

* Average of 7 months. † Average of 5 months for males and of 6 months for females.

APPENDIX A.—TABLE XXI.—*continued.*

Average Number of Patients Resident, and the Results of Treatment in each Asylum or other Establishment, for the Year 1904.

(b) *Private Asylums.*

PRIVATE ASYLUMS.	Average Number Resident.		Admissions (including Transfers).		Recoveries.		Discharges not Recovered (including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Mavisbank,.....	22·0	21·5	4	13	3	6	2	...	3	...	75·0	46 2	13·6	...
2. Saughton Hall,.....	21·0	45·0	4	1	2	2	1	...	3	1	50·0	200·0	14·3	2·2
3. Westermains,.....	2·0	12·5	...	4	..	1	...	3	...	1	...	25·0	...	8·0
GENERAL RESULTS,...	45·0	79·0	8	18	5	9	3	3	6	2	62·5	50·0	13·3	2·5

(c) *Parochial Asylums.*

(Lunatic Wards of Poorhouses with Unrestricted Licences.)

PAROCHIAL ASYLUMS.	Average Number Resident.		Admissions (including Transfers).		Recoveries.		Discharges not Recovered (including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Greenock,.....	125·5	115·0	46	35	23	16	4	4	14	13	50·0	45·7	11·2	11·3
2. Paisley, Craw Rd.	33·0	47·5	10	3	1	..	1	...	2	2	10·0	..	6·1	4·2
3. ,, Riccartsbar,	94·0	99·0	48	68	28	27	18	14	10	21	58·3	39·7	10·6	21·2
GENERAL RESULTS,	252·5	261·5	104	106	52	43	23	18	26	36	50·0	40·6	10·3	13·8

APPENDIX A.—TABLE XXI.—*continued.*

Average Number of Patients Resident, and the Results of Treatment in each Asylum or other Establishment, for the Year 1904.

(d) *Lunatic Wards of Poorhouses with Restricted Licences.*

LUNATIC WARDS OF POORHOUSES.	Average Number Resident.		Admissions (including Transfers).		Recoveries.		Discharges not Recovered (including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Aberdeen (East),	*43·0	46·0	10	14	1	...	52	60	...	...	10·0	...	...	...
2. Aberdeen (West),	*29·0	27·5	9	16	2	1	36	41	...	1	22·2	6·3	...	3·6
3. Buchan (New Maud),	26·0	26·0	4	2	...	...	4	2	...	...	...	...	...	...
4. Cunninghame (Irvine),	47·5	46·0	1	6	...	...	...	2	2	2	...	...	4·2	4·3
5. Dumbarton,	29·0	30·5	6	6	...	1	3	2	1	...	...	16·7	3·4	...
6. Dundee East,	46·0	47·0	10	8	...	1	4	2	2	5	...	12·5	4·3	10·6
7. Dundee West,	†29·0	28·0	...	...	2	2	29	29	1	4	...	...	3·4	14·3
8. Edinburgh (City),	137·0	86·5	17	9	1	...	12	9	6	3	5·9	...	4·4	3·5
9. Govan (Glasgow)	99·0	97·0	11	11	1	...	3	1	7	4	9·1	...	7·1	4·1
10. Inveresk (Musselburgh),	15·0	15·0	...	...	...	...	2	2	...	...	...	...	...	...
11. Kincardine (Stonehaven),	20·0	20·5	4	3	2	...	2	2	2	...	50·0	...	10·0	...
12. Linlithgow,	18·0	16·5	4	...	...	...	2	...	...	1	...	...	...	6·1
13. Old Monkland,	25·0	25·0	...	5	...	...	...	3	...	2	...	...	...	8·0
14. Perth,	17·0	19·0	6	2	...	...	1	3	3	1	...	...	17·6	5·3
15. Wigtown (Stranraer),	20·0	15·0	5	1	...	1	2	...	3	...	...	100·0	15·0	...
GENERAL RESULTS,	600·5	545·5	87	83	9	6	152	158	27	23	10 3	7·2	4·5	4·2

* Average of four months. † Average of ten months.

APPENDIX A.—TABLE XXI.—*continued.*

Average Number of Patients Resident, and the Results of Treatment in each Asylum or other Establishment, for the Year 1904.

(e) *Training Schools for Imbecile Children.*

INSTITUTIONS.	Average Number Resident.		Admissions.		Recoveries.		Discharges not Recovered.		Deaths.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Baldovan, ...	78·5	49·5	26	15	...	...	6	5	9	3
Larbert,.....	189·0	100·0	31	15	...	...	40	20	17	5
TOTAL, ...	267·5	149·5	57	30	...	...	46	25	26	8

Classification of the Causes of Death of Patients who died in Asylums and other Establishments in the Year 1904.

(a) *Royal and District Asylums.*

ROYAL AND DISTRICT ASYLUMS.	Average Number Resident.		NUMBER OF DEATHS OF MALES AND FEMALES FROM SPECIFIC CAUSES.																													
			Total Number of Deaths.		Number of foregoing Deaths which took place within a Year after Admission.		Cerebral and Spinal Affections.										Thoracic Affections.						Abdominal Affections.						Fever, Erysipelas, Cancer, etc.		General Debility and Old Age.		Suicides and Accidents.		Cause unknown.	
							Apoplexy and Paralysis.		Epilepsy and Convulsions.		General Paralysis.		Maniacal and Melancholic Exhaustion.		Organic Disease of Brain, Tumours, etc.		Consumption.		Inflammation of Lungs and Membranes, and other forms of Pulmonary Disease.		Disease of the Heart, Aneurism, etc.		Inflammation of Stomach, Intestines, or Peritoneum.		Disease of Liver, Kidneys, etc.		Dysentery and Diarrhœa.								
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Aberdeen Royal	448·5	490·5	36	19	16	9	2	...	1	...	8	...	5	5	1	2	2	5	8	1	5	2	1	1	...	...	...	...	1	1	2	2	...	...	...	...
Aberdeen District	*140·5	149·0	6	6	6	6	1	...	1	...	...	...	...	...	...	1	...	2	...	...	...	2	...	...	...	...	...	...	3	1	1	...	...	...	...	...
Argyll	215·0	229·5	6	14	2	1	...	2	...	...	...	...	...	...	...	...	4	2	1	3	1	5	...	...	...	...	...	...	...	...	2	...	...	...	...	...
Ayr	249·5	263·5	25	34	13	19	1	2	...	1	3	2	2	5	1	...	3	4	5	2	5	11	...	2	...	1	...	...	2	2	2	2	‡1	...	...	...
Banff	87·0	88·5	3	2	1	...	...	...	...	...	1	...	...	...	...	...	1	...	...	2	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...
Crichton Royal	367·5	407·5	21	23	6	9	1	1	...	2	1	...	...	...	1	2	5	6	6	1	3	3	1	2	...	1	...	3	2	3	...	...	...	...	...	...
Dundee Royal	23·5	28·0	3	2	3	2	...	...	...	...	...	...	...	...	...	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...
Dundee District	169·5	225·0	28	20	15	9	2	...	1	...	7	1	...	...	2	1	2	5	2	...	4	6	2	...	...	...	3	2	1	1	2	4	...	...	...	...
Edinburgh Royal	412·5	453·0	53	68	29	43	4	4	3	1	19	16	2	8	2	10	7	5	1	5	...	3	2	...	...	3	...	...	3	4	9	8	‡1	1	...	...
Edinburgh District	†77·5	92·5	1	1	1	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Elgin	73·0	100·5	13	8	4	2	1	1	3	1	...	...	...	...	1	2	2	2	2	...	2	...	...	...	...	1	...	...	...	1	2	...	...	...	...	...
Fife	276·5	292·5	23	17	11	9	...	2	2	2	3	1	...	...	6	1	3	...	2	3	1	2	...	2	4	1	...	1	...	2	1	...	1	...	...	...
Glasgow Royal	179·0	241·5	17	10	7	3	1	...	...	...	7	1	...	1	3	2	...	...	1	2	...	1	2	2	...	1	...	...	1	...	1	...	1	...	...	...
Glasgow District (Gartloch)	346·0	312·5	34	33	15	11	3	1	3	3	12	2	2	...	...	3	2	6	4	**6**	4	2	...	...	1	2	...	...	1	5	2	3	...	...	...	...
Glasgow District (Woodilee)	475·0	427·5	43	36	20	14	...	1	2	1	10	5	2	2	1	4	5	2	5	6	6	...	1	3	1	2	...	...	3	1	6	8	1	1	...	...
Govan	282·0	219·5	37	41	23	23	5	5	2	1	10	4	3	3	...	5	4	5	2	3	7	6	...	1	...	2	...	...	1	4	3	2	...	...	...	...
Haddington	70·5	90·0	10	6	4	...	1	...	...	1	2	...	...	...	...	...	...	1	1	...	4	...	...	...	...	...	...	...	...	2	2	2	...	...	...	...
Inverness	341·0	326·0	25	19	11	2	1	2	...	2	2	...	...	...	2	1	4	5	3	2	6	3	1	1	4	...	...	...	2	1	...	...	...	2	...	...
Kirklands	112·5	102·0	12	14	3	8	...	1	1	2	3	...	...	...	4	...	3	4	1	4	...	2	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Lanark	447·0	445·5	38	33	17	7	3	1	...	1	7	1	2	1	...	...	3	10	**16**	4	4	5	...	5	...	2	1	1	2	...	...	2	...	...	...	...
Midlothian	167·5	176·0	17	13	8	6	1	2	...	...	2	1	...	1	1	...	5	2	3	1	3	**3**	1	...	...	...	...	...	...	1	...	2	1	...	...	...
Montrose Royal	305·5	369·0	27	35	8	15	1	3	...	...	7	2	2	3	2	9	4	1	3	1	4	5	...	...	...	...	...	...	...	1	4	8	...	§2	...	...
Murray's Royal	72·0	61·5	8	4	1	1	...	...	...	1	1	1	...	...	...	...	1	1	...	...	2	...	...	1	1	...	...	...	...	...	2	...	1	...	...	...
Perth	181·5	192·5	8	23	5	10	2	2	...	1	1	1	1	2	1	2	...	4	...	1	2	...	...	...	...	1	...	...	...	1	...	9	...	...	...	...
Roxburgh	143·0	185·5	19	16	4	3	2	...	...	...	1	1	...	...	...	1	5	4	2	...	6	7	...	1	...	...	...	...	1	1	...	...	2	1	...	...
Stirling	267·5	314·0	43	38	17	17	2	1	3	...	13	3	1	3	...	5	3	6	4	4	11	6	3	3	1	4	...	...	1	3	...	1	...	...	...	...
TOTAL,	6030·5	6283·0	556	535	240	230	35	31	22	20	120	42	22	34	28	52	69	82	73	51	80	74	14	25	13	20	5	4	23	35	41	58	11	7	...	...

* Average of 7 months. † Average of 5 months for males and of 6 months for females. ‡ The injuries in these cases were sustained previous to the patient's admission to the asylum. § The injuries in one of these cases were sustained previous to the patient's admission to the asylum.

APPENDIX A.—TABLE XXII.—*continued.*

Classification of the Causes of Death of Patients who died in Asylums and other Establishments in the Year 1904.

(b) *Private Asylums.*

PRIVATE ASYLUMS.	Average Number Resident.		NUMBER OF DEATHS OF MALES AND FEMALES FROM SPECIFIC CAUSES.																															
			Total Number of Deaths.		Number of foregoing Deaths which took place within a Year after Admission.		Cerebral and Spinal Affections.										Thoracic Affections.						Abdominal Affections.						Fever, Erysipelas, Cancer, etc.		General Debility and Old Age.		Suicides and Accidents.		Cause unknown.	
							Apoplexy and Paralysis.		Epilepsy and Convulsions.		General Paralysis.		Maniacal and Melancholic Exhaustion.		Organic Disease of Brain, Tumours, etc.		Consumption.		Inflammation of Lungs and Membranes, and other forms of Pulmonary Disease.		Disease of the Heart, Aneurism, etc.		Inflammation of Stomach, Intestines, or Peritoneum.		Disease of Liver, Kidneys, etc.		Dysentery and Diarrhœa.									
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Mavisbank . .	22·0	21·5	3	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Saughton Hall .	21·0	45·0	3	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	1	...	...	...	...	...	...	...	1	...	...	...	...
Westermains .	2·0	12·5	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
TOTALS, .	45·0	79·0	6	2	2	...	...	...	...	...	2	...	...	...	...	...	...	...	...	1	2	...	1	...	...	...	...	...	...	...	1	1	...	...	...	...

(c) *Parochial Asylums.*

(Lunatic Wards of Poorhouses with Unrestricted Licences.)

PAROCHIAL ASYLUMS																																				
Greenock . .	125·5	115·0	14	13	5	7	1	...	2	2	3	...	1	...	1	...	1	3	2	1	...	1	...	...	1	1	...	...	...	...	1	5	*1	...	...	...
Paisley (Craw Road)	33·0	47·5	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...
,, (Riccartsbar)	94·0	99·0	10	21	4	14	...	...	...	2	1	1	...	5	2	...	1	1	2	1	1	1	1	1	...	2	...	1	...	2	2	4	...	...	...	...
TOTALS, .	252·5	261·5	26	36	9	21	1	...	2	4	4	1	1	5	3	...	2	4	4	4	2	2	1	1	1	3	...	1	...	2	4	9	1	...	...	...

* The injuries in this case were sustained previous to the patient's admission to the asylum.

Classification of the Causes of Death of Patients who died in Asylums and other Establishments in the Year 1904.

(d) *Lunatic Wards of Poorhouses with Restricted Licences.*

LUNATIC WARDS OF POORHOUSES.	Average Number Resident.		NUMBER OF DEATHS OF MALES AND FEMALES FROM SPECIFIC CAUSES.																																	
			Total Number of Deaths.		Number of foregoing Deaths which took place within a Year after Admission.		Cerebral and Spinal Affections.										Thoracic Affections.						Abdominal Affections.						Fever, Erysipelas, Cancer, etc.		General Debility and Old Age.		Suicides and Accidents.		Cause unknown.	
							Apoplexy and Paralysis.		Epilepsy and Convulsions.		General Paralysis.		Maniacal and Melancholic Exhaustion.		Organic Disease of Brain, Tumours, etc.		Consumption.		Inflammation of Lungs and Membranes, and other forms of Pulmonary Disease.		Disease of the Heart, Aneurism, etc.		Inflammation of Stomach, Intestines, or Peritoneum.		Disease of Liver, Kidneys, etc.		Dysentery and Diarrhœa.									
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Aberdeen East	*43·0	46·0	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Aberdeen West	*29·0	27·5	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Buchan	26·0	26·0	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cunninghame	47·5	46·0	2	2	...	...	...	1	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...
Dumbarton	29·0	30·5	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dundee East	46·0	47·0	2	5	...	2	...	...	...	...	...	...	...	...	...	1	1	...	1	1	...	1	...	...	...	2	...	...	...	...	...	...	...	...	...	...
Dundee West	†29·0	28·0	1	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	2	...	...	1	...	...	1	...	...	...	...
Edinburgh	137·0	86·5	6	3	1	1	...	1	...	...	...	...	...	...	...	...	3	...	1	1	1	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Govan	99·0	97·0	7	4	1	1	2	1	...	...	...	...	...	...	1	...	2	...	...	1	2	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...
Inveresk	15·0	15·0	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Kincardine	20·0	20·5	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Linlithgow	18·0	16·5	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Old Monkland	25·0	25·0	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Perth	17·0	19·0	3	1	1	...	...	...	...	...	...	...	...	...	...	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Wigtown	20·0	15·0	3	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...
TOTALS,	600·5	545·5	27	23	6	6	2	4	...	...	1	...	...	...	1	1	8	...	4	3	5	3	2	1	...	6	...	...	2	...	2	5	...	...	...	...

* Average of 4 months. † Average of 10 months.

APPENDIX A.—

RETURN of Expenditure for each County on Account of

	COUNTIES.	Number of Pauper Lunatics Relieved during the Year.		Number of Days during the Year on which Relief was granted to Patients.							Proportion per cent. of Days of Relief.		
				In Royal Asylums.	In District Asylums.	In Parochial Asylums.	In Lunatic Wards of Poorhouses with Restricted Licences.	In Training Schools for Imbecile Children.	In Private Dwellings.	TOTAL.	In Royal, District, and Parochial Asylums, and Training Schools for Imbecile Children.	In Lunatic Wards of Poorhouses with Restricted Licences.	In Private Dwellings.
		M.	F.						With Relatives. / With Strangers.				
1	Aberdeen, ...	589	627	259,224	2,043	24	75,572	6,138	16,923 / 26,206	386,130	69·2	19·6	11·2
2	Argyll, ...	226	238	10	122,348	...	...	732	14,055 / 18,490	155,635	79·1	...	20·9
3	Ayr, ...	401	432	35	189,713	66	39,084	3,821	12,273 / 9,215	254,207	76·2	15·4	8·4
4	Banff, ...	133	140	328	61,900	...	...	732	12,266 / 12,162	87,388	72·0	...	28·0
5	Berwick, ...	61	63	46	31,532	...	...	293	4,926 / 4,352	41,149	77·5	...	22·5
6	Bute, ...	34	54	...	22,748	...	...	366	1,098 / 4,770	28,982	79·8	...	20·2
7	Caithness, ...	91	119	35,677	1,340	...	2,217	5,124	15,552 / 6,633	66,543	63·3	3·3	33·4
8	Clackmannan, ...	50	48	257	24,102	...	1,464	366	1,675 / 4,026	31,890	77·5	4·6	17·9
9	Dumbarton, ...	162	157	...	57,662	141	19,207	2,009	915 / 11,529	91,463	65·4	21·0	13·6
10	Dumfries, ...	101	112	60,092	400	...	...	79	4,455 / 4,508	69,534	87·1	...	12·9
11	Edinburgh, ...	888	966	192,152	142,289	567	90,019	11,971	17,578 / 105,708	560,284	61·9	16·1	22·0
12	Elgin, ...	102	116	237	54,341	...	...	918	6,204 / 4,437	66,137	84·0	...	16·0
13	Fife, ...	377	366	662	193,304	...	62	1,542	8,669 / 27,689	231,928	84·3	...	15·7
14	Forfar, ...	552	714	166,986	85,841	...	60,637	8,353	13,062 / 58,027	392,906	66·5	15·4	18·1
15	Haddington, ...	87	111	42	53,154	...	4,670	1,098	3,294 / 1,367	63,625	85·3	7·4	7·3
16	Inverness, ...	300	302	105	105,952	...	...	1,093	51,263 / 31,885	190,298	56·3	...	43·7
17	Kincardine, ...	46	59	23,909	...	...	5,113	366	1,098 / 1,307	31,793	76·3	16·1	7·6
18	Kinross, ...	7	22	...	8,655	...	...	...	732 / 633	10,020	86·4	...	13·6
19	Kirkcudbright, ...	47	70	32,538	...	...	...	366	4,197 / 1,769	38,870	84·7	...	15·3
20	Lanark, ...	2,393	2,245	1,331	1,031,777	1,027	89,896	50,408	33,668 / 180,277	1,388,384	78·1	6·5	15·4
21	Linlithgow, ...	100	67	332	35,289	...	9,056	645	2,562 / 2,180	50,064	72·4	18·1	9·5
22	Nairn, ...	25	22	...	11,373	...	...	...	1,464 / 2,680	15,517	73·3	...	26·7
23	Orkney, ...	61	68	15,926	10,268	...	...	...	9,495 / 7,538	43,227	60·6	...	39·4
24	Peebles, ...	24	26	5	14,448	...	...	366	366 / ...	15,185	97·6	...	2·4
25	Perth, ...	287	311	379	135,374	...	12,611	4,563	9,855 / 27,236	190,018	73·9	6·6	19·5
26	Renfrew, ...	421	450	462	30,318	183,208	1,830	3,013	2,776 / 27,487	249,094	87·1	0·7	12·2
27	Ross, ...	234	239	276	89,602	...	...	...	48,828 / 14,221	152,927	58·8	...	41·2
28	Roxburgh, ...	93	112	176	57,338	...	...	732	5,660 / 2,936	66,842	87·1	...	12·9
29	Selkirk, ...	28	45	...	19,722	...	...	...	1,464 / 1,067	22,253	88·6	...	11·4
30	Shetland, ...	58	70	23,385	...	...	969	...	13,298 / 2,913	40,565	57·6	2·4	40·0
31	Stirling, ...	218	209	66	102,321	...	2,574	1,621	5,901 / 13,628	126,111	82·5	2·0	15·5
32	Sutherland, ...	49	63	321	24,298	...	...	...	10,924 / 1,630	37,173	66·2	...	33·8
33	Wigtown, ...	57	55	20,829	50	...	7,630	732	6,001 / 1,830	37,072	58·3	20·6	21·1
	Totals and Averages, ...	8,302	8,698	835,788	2,719,502	185,033	422 611	107,447	342,497 / 620,336	5,233,214	73·5	8·1	18·4

TABLE XXIII.

Pauper Lunatics during the Year ending 15th May 1904.

Expenditure for Maintenance of Patients during the Year.										
In Royal Asylums.	In District Asylums.	In Parochial Asylums.	In Lunatic Wards of Poorhouses with Restricted Licences.	In Training Schools for Imbecile Children.	In Private Dwellings.		Extra Expenditure for Certificates of Lunacy, Trial, etc., of Dangerous Lunatics, and Transport of Patients, etc.	Total Expenditure during the Year.	Amount of Expenditure Repaid or Contributed by Relatives or Others.	Amount of foregoing Expenditure Contributed by Government.	COUNTIES.
					With Relatives.	With Strangers.					
£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	
22,732 10 4	125 10 11	2 2 10	3,769 7 0	459 16 5	667 5 8	1,236 19 6	611 7 10	29,605 0 6	1,296 11 1	8,586 9 7	1. Aberdeen.
0 13 4	8,784 19 10	...	...	57 14 6	575 6 6	939 9 9	388 14 7	10,746 18 6	189 16 4	3,528 12 8	2. Argyll.
2 18 7	14,275 1 8	5 14 3	1,635 12 0	309 17 2	487 17 6	442 10 2	527 8 4	17,686 19 8	1,841 1 7	5,367 6 11	3. Ayr.
29 1 10	3,381 7 9	...	...	50 0 0	466 0 3	536 3 0	90 5 4	4,552 18 2	303 11 7	1,739 1 8	4. Banff.
4 0 8	2,426 11 1	...	...	19 19 8	169 0 7	247 12 4	68 13 0	2,935 17 4	159 13 6	898 16 4	5. Berwick.
...	1,666 18 0	...	...	25 0 0	49 10 0	229 2 6	74 10 5	2,045 0 11	138 13 2	651 4 0	6. Bute.
3,121 14 10	95 8 1	...	142 5 8	147 2 1	567 6 7	328 8 5	211 4 5	4,613 10 1	38 14 10	1,351 3 1	7. Caithness.
29 12 5	1,853 13 9	...	92 9 9	33 2 0	73 7 6	226 10 8	46 12 9	2,355 8 10	199 1 11	696 2 11	8. Clackmannan.
...	4,505 6 5	12 11 9	833 11 6	164 0 3	39 1 11	672 5 11	318 13 11	6,545 11 8	439 6 2	2,044 15 2	9. Dumbarton.
3,945 2 8	31 10 9	...	...	5 8 2	190 0 7	233 12 1	126 3 7	4,531 17 10	51 7 2	1,613 3 10	10. Dumfries.
16,983 3 11	11,712 2 4	51 4 10	5,833 8 2	912 6 7	766 11 4	6,294 12 2	1,074 10 7	43,627 19 11	2,526 18 2	12,767 2 2	11. Edinburgh.
21 7 9	3,299 1 8	...	...	66 18 6	269 12 9	207 13 1	126 18 1	3,991 11 10	255 19 3	1,467 6 9	12. Elgin.
62 13 5	13,252 7 11	...	3 11 2	117 17 5	394 6 5	1,482 3 9	491 12 2	15,804 12 3	1,606 2 8	5,052 6 11	13. Fife.
14,824 2 1	5,834 7 3	...	3,106 17 5	604 18 10	607 0 5	3,130 2 5	767 2 2	28,874 10 7	1,119 12 3	9,054 18 7	14. Forfar.
3 0 0	3,582 4 3	...	230 2 4	75 0 0	139 10 7	78 4 10	135 6 0	4,243 8 0	222 17 2	1,422 7 11	15. Haddington.
10 0 9	7,639 12 10	...	...	82 7 0	1,733 13 8	1,365 0 6	627 13 4	11,458 8 1	369 10 2	3,819 9 1	16. Inverness.
2,088 18 7	...	...	218 1 4	25 0 0	53 10 11	57 4 3	82 12 9	2,525 7 10	122 4 2	718 3 11	17. Kincardine.
...	590 18 6	...	...	...	37 4 6	35 12 3	6 4 4	669 19 7	168 8 4	181 0 9	18. Kinross.
2,135 16 6	...	..	...	33 2 0	199 15 5	92 11 7	49 1 3	2,510 6 9	55 11 4	906 17 4	19. Kirkcudbright.
111 13 4	74,182 15 0	84 17 10	5,118 9 11	3,746 15 10	1,362 16 9	10,820 7 7	2,277 9 9	97,705 6 0	5,038 17 3	31,613 6 7	20. Lanark.
29 1 6	2,718 18 1	...	533 2 4	65 11 0	108 11 8	135 13 11	164 18 6	3,755 17 0	204 5 4	1,153 11 11	21. Linlithgow.
...	807 17 0	...	...	...	58 8 11	130 11 1	33 19 8	1,030 16 8	62 0 0	333 13 2	22. Nairn.
1,398 19 11	873 11 4	...	...	...	305 7 11	315 18 11	89 18 11	2,983 17 0	142 16 4	855 11 3	23. Orkney.
0 8 10	1,152 1 4	...	...	32 14 0	17 1 0	...	58 7 4	1,260 12 6	52 9 1	354 17 2	24. Peebles.
31 18 7	9,656 18 2	...	760 12 0	323 17 4	443 2 10	1,525 14 2	371 2 4	13,113 5 5	1,262 4 10	4,103 19 2	25. Perth.
40 16 11	2,653 4 0	13,506 4 7	111 2 1	214 6 0	136 18 4	1,650 7 10	345 14 7	18,658 14 4	1,681 15 8	5,639 18 7	26. Renfrew.
23 15 8	6,202 13 9	...	...	...	1,554 1 0	606 15 1	510 6 5	8,897 11 11	287 0 10	2,918 2 7	27. Ross.
18 1 1	4,411 19 5	...	...	66 10 0	257 0 2	167 12 10	113 18 9	5,035 2 3	580 10 2	1,450 7 8	28. Roxburgh.
...	1,531 9 7	...	...	...	68 7 1	63 0 7	45 16 0	1,708 13 3	205 13 6	507 1 2	29. Selkirk.
2,089 5 2	...	...	58 1 7	...	394 11 7	111 2 7	123 15 11	2,776 16 10	86 12 3	770 15 3	30. Shetland.
5 13 11	7,942 1 1	..	160 4 8	142 7 0	254 1 7	791 1 5	299 4 11	9,594 14 7	560 18 7	2,873 12 1	31. Stirling.
28 1 0	1,773 16 8	..	...	...	350 0 4	77 6 8	118 2 4	2,347 7 0	110 3 6	750 8 4	32. Sutherland.
1,376 6 0	3 15 0	...	388 15 0	58 7 6	268 0 0	96 4 0	88 13 8	2,280 1 2	44 9 4	800 0 5	33. Wigtown.
71,148 19 7	196,968 3 5	13,662 16 1	22,995 13 11	7,889 19 3	13,064 12 3	34,327 15 10	10,466 3 11	370,474 4 3	21,424 17 6	115,991 14 11	Totals and Averages.

APPENDIX A.—Table XXIV.

Expenditure by Parish Councils on account of Pauper Lunatics for each Year from 1859 to 1903–1904.

YEARS.	In Asylums, and Schools for Imbeciles.	In Lunatic Wards of Poorhouses.	In Private Dwellings.	For Certificates, Cost of Transport, &c.	Total Expenditure.
Average of 5 Years 1859–1863 ..	61,735	14,695	14,763	4031	95,225
Average of 5 Years	73,416	19,241	15,157	4400	112,214
1869	99,754	11,415	15,509	5032	131,710
1870	102,243	10,978	15,826	4547	133,593
1871	102,769	10,799	16,167	4447	134,182
1872	104,545	10,869	17,013	4738	137,165
1873	115,778	10,702	17 211	5267	148,959
Average of 5 Years	105,018	10,952	16,345	4806	137,122
1874–75	124,663	11,758	17,098	4288	157,807
1875–76	130,776	12,530	17,340	4616	165,261
1876–77	137,879	13,302	17,890	4517	173,588
1877–78	147,015	13,029	18,088	5252	183,383
1878–79	151,056	13,332	18,518	5373	188,280
Average of 5 Years	138,278	12,790	17,787	4809	173,664
1879–80	155,333	13,101	19,366	5787	193,586
1880–81	161,145	13,788	20,533	5603	201,068
1881–82	168,448	13,958	21,830	6314	210,551
1882–83	168,140	13,970	24,593	6506	213,209
1883–84	166,938	14,148	26,449	6730	214,265
Average of 5 Years	164,001	13,793	22,554	6188	206,536
1884–85	169,681	14,641	28,184	6241	218,747
1885–86	170,170	15,855	31,203	6823	224,052
1886–87	169,725	16,604	33,107	6546	225,982
1887–88	168,336	16,186	34,717	6551	225,789
1888–89	170,688	15,887	35,662	7110	229,347
Average of 5 Years	169,720	15,835	32,575	6654	224,783
1889–90	174,671	15,962	38,256	7376	236,265
1890–91	180,627	16,665	39,175	7646	244,113
1891–92	186,831	17,115	39,435	8247	251,628
1892–93	189,102	16,476	40,781	8663	255,021
1893–94	191,590	16,570	42,389	9035	259,585
Average of 5 Years..	184,564	16,558	40,007	8193	249,322
1894–95	197,994	15,842	44,172	9331	267,339
1895–96	207,691	15,023	44,959	9193	276,866
1896–97	215,849	15,646	44,618	9259	285,372
1897–98	228,486	16,280	43,994	10,118	298,878
1898–99	237,514	17,265	44,832	9,745	309,356
Average of 5 Years	217,507	16,011	44,515	9529	287,562
1899–1900	253,541	17,446	45,883	9,246	326,116
1900–1901	265,602	24,142	46,672	9,244	345,660
1901–1902	278,144	22,527	47,108	9,834	357,613
1902–1903	285,664	22,935	47,328	10,145	366,072
1903–1904	289,620	22,996	47,392	10,466	370,474
Average of 5 Years	274,514	22,009	46,877	9,787	353,187

APPENDIX A.—Table XXV.

The Average Daily Cost of Maintenance of Pauper Lunatics in the different Classes of Establishments and in Private Dwellings in each of the Ten Years 1894–95 to 1903–1904.

ASYLUMS.	1894–5	1895–6	1896–7	1897–8	1898–9	1899–1900	1900–1901	1901–1902	1902–1903	1903–1904
	s. d.	*s. d.*	*s. d.*	*s. d.*	*s. d.*	*s. d.*	*s. d.*	*s. d.*	*s. d.*	*s. d.*
In Royal and District Asylums, Private Asylums, Parochial Asylums, and Schools for Imbeciles, . . .	1 4¼	1 4½	1 4½	1 5	1 5	1 5½	1 6	1 6¼	1 6¼	1 6
In Lunatic Wards of Poorhouses, . .	1 ¼	0 11¾	1 0½		1 0½	1 0¾	1 3	1 1¼	1 1	1 1
In Private Dwellings,	0 10¾	0 11	0 11	0 11	0 11	0 11¼	0 11½	0 11	0 11¾	0 11¾
General Averages,	1 3¼	1 3½	1 3½	1 3¾	1 4½	1 4¾	1 5	1 5	1 5	1 5

APPENDIX A.—Table XXVI.

The Daily Rate of Maintenance for each mode of providing for Pauper Lunatics in each County during the Year ending 15th May 1904.

COUNTIES.	In Royal, District, and Parochial Asylums, and Training Schools for Imbecile Children.	In Licensed Wards of Poor-houses with Restricted Licences.	In Private Dwellings.	General Averages. (This also includes the Extra Expenditure for Certificates of Lunacy, Cost of Transport, &c.)	Percentage of Patients.		
					In Royal, District, and Parochial Asylums, and Training Schools for Imbecile Children.	In Licens'd Wards of Poor-houses with Restricted Licences.	In Private Dwellings.
	s. d.	*s. d.*	*s. d.*	*s. d.*			
1. Aberdeen,	1 9	1 0	0 10½	1 6½	69·2	19·6	11·2
2. Argyll,	1 5¼	...	0 11¼	1 4½	79·1	...	20·9
3. Ayr,	1 6	0 10	0 10½	1 4¾	76·2	15·4	8·4
4. Banff,	1 1¼	...	0 9¾	1 0½	72·0	...	28·0
5. Berwick,	1 6½	...	0 10¾	1 5	77·5	...	22·5
6. Bute,	1 5½	...	0 11½	1 5	79·8	...	20·2
7. Caithness,	1 7¼	...	0 9¾	1 4¾	63·3	3·3	33·4
8. Clackmannan,	1 6½	1 3	1 0¾	1 5¾	77·5	4·6	17·9
9. Dumbarton,	1 6¾	0 10½	1 1¾	1 5½	65·4	21·0	13·6
10. Dumfries,	1 3¾	...	0 11¼	1 3¾	87·1	...	12·9
11. Edinburgh,	1 8½	1 3½	1 1¾	1 6¾	61·9	16·1	22·0
12. Elgin,	1 2¾	...	0 10¾	1 2½	84·0	...	16·0
13. Fife,	1 4½	...	1 0½	1 4¼	84·3	...	15·7
14. Forfar,	1 7½	1 0¼	1 0½	1 5¾	66·5	15·4	18·1
15. Haddington,	1 4¼	0 11¾	0 11¼	1 4	85·3	7·4	7·3
16. Inverness,	1 5¼	...	0 9	1 2½	56·3	...	43·7
17. Kincardine,	1 9	0 10¼	0 11	1 7	76·3	16·1	7·6
18. Kinross,	1 4½	...	1 0¾	1 4	86·4	...	13·6
19. Kirkcudbright,	1 3¾	...	0 11¾	1 3½	84·7	...	15·3
20. Lanark,	1 5¼	1 1¾	1 1¾	1 5	78·1	6·5	15·4
21. Linlithgow,	1 6½	1 2¼	1 0¼	1 6	72·4	18·1	9·5
22. Nairn,	1 5	...	0 11	1 4	73·3	...	26·7
23. Orkney,	1 8¾	...	0 8¾	1 4½	60·6	...	39·4
24. Peebles,	1 7¼	...	0 11¼	1 8	97·6	...	2·4
25. Perth,	1 5¼	1 2½	1 0¾	1 4½	73·9	6·6	19·5
26. Renfrew,	1 6¼	...	1 2¼	1 6	87·1	0·7	12·2
27. Ross,	1 4¾	...	0 8¼	1 2	58·8	...	41·2
28. Roxburgh,	1 6½	...	0 11¾	1 6	87·1	...	12·9
29. Selkirk,	1 6¾	...	1 0½	1 6½	88·6	...	11·4
30. Shetland,	1 9½	...	0 7½	1 4½	57·6	2·4	40·0
31. Stirling,	1 6¾	1 3	1 0¾	1 6¼	82·5	2·0	15·5
32. Sutherland,	1 5½	...	0 8¼	1 3¼	66·2	...	33·8
33. Wigtown,	1 4	1 0¼	0 11¼	1 2¾	58·3	20·6	21·1
General Averages,	1 6	1 1	0 11¾	1 5	73·5	8·1	18·4

APPENDIX A.—TABLE XXVII.

Present Rates of Board per annum in Royal and District Asylums and in Training Schools, and the estimated Annual Cost of Patients in Parochial Asylums and Poorhouses.

ROYAL OR CHARTERED ASYLUMS.	Rates for Pauper Patients.		Minimum Rates for Private Patients.(1)	
	From the District.	From beyond the District.	Special or District Rate.	General Rate.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Aberdeen Royal Asylum,	32 0 0	...	...	30 0 0
Crichton ,, ,,	24 0 0	...	25 0 0	40 0 0
Dundee ,, ,,	...	...	25 0 0	40 0 0
Edinburgh ,, ,,	33 4 0	33 4 0	...	31 4 0
Glasgow ,, ,,	...	...	25 0 0	40 0 0
Montrose ,, ,,	32 0 0	34 0 0	25 0 0	42 0 0
Murray's ,, ,,	...	...	30 0 0	84 0 0
DISTRICT ASYLUMS.				
Aberdeen District Asylum,	29 10 0	...	...	...
Argyll & Bute District Asylum,	22 2 0	...	22 2 0	32 0 0
Ayr ,, ,,	27 6 0	...	...	...
Banff ,, ,,	21 5 10	...	...	27 7 6
Dundee ,, ,,	24 0 0	32 10 0	...	...
Edinburgh ,, ,,	28 0 0	...	...	...
Elgin ,, ,,	23 0 0	30 0 0	25 0 0	30 0 0
Fife ,, ,,	25 0 0	...	(2)33 0 0	...
Glasgow District Asylum (Gartloch)	31 4 0	...	...	...
Glasgow ,, ,, (Woodilee)	31 4 0	...	...	...
Govan ,, ,,	29 18 0	...	32 0 0	32 0 0
Haddington ,, ,,	24 0 0	...	...	30 0 0
Inverness ,, ,,	26 0 0	...	35 0 0	40 0 0
Kirklands Asylum, Bothwell,	24 14 0	...	...	...
Lanark District Asylum,	24 5 4	32 0 0	...	32 0 0
Midlothian ,, ,,	26 0 0	32 0 0	32 0 0	36 0 0
Perth ,, ,,	26 0 0	...	...	...
Roxburgh ,, ,,	29 0 0	...	29 0 0	40 0 0
Stirling ,, ,,	27 10 0	32 10 0	35 0 0	52 0 0

PAROCHIAL ASYLUMS.	(3) Estimated Annual Cost of Patients belonging to Parish or Combination.	Rates charged for Boarders from other Parishes.	PAROCHIAL ASYLUMS. —(*Continued.*)	(3) Estimated Annual Cost of Patients belonging to Parish or Combination.	Rates charged for Boarders from other Parishes.
	£ s. d.	£ s. d.		£ s. d.	£ s. d.
Greenock Parochial Asylum,	24 19 5	32 10 0	Paisley (Riccartsbar),	27 3 10	32 10 0
Paisley (Craw Road),	28 13 1	32 10 0			

LUNATIC WARDS OF POORHOUSES.			LUNATIC WARDS OF POORHOUSES. —(*Continued.*)		
Buchan,	15 15 3	...	Inveresk,	22 13 11	...
Cunninghame,	17 17 6	...	Kincardine,	19 11 1	20 0 0
Dumbarton,	21 5 9	...	Linlithgow,	23 16 8	...
Dundee, East,	23 10 2	...	Old Monkland	21 6 10	22 2 0
Edinburgh,	23 7 10	...	Perth,	24 16 2	22 2 0
Govan,	24 16 2	...	Wigtown,	18 4 0	23 8 0

TRAINING SCHOOLS FOR IMBECILE CHILDREN.	Rates charged for Pauper Patients.	Minimum Rate for Private Patients.
	£ s. d.	£ s. d.
Baldovan,	28 0 0	28 0 0
Larbert,	27 10 0	25 0 0

(1) Most, if not all, of the Royal Asylums receive special cases at lower rates.
(2) Restricted to female patients.
(3) The rent is taken as the proportion allocated to the lunatic wards of the gross rental in the valuation roll for the year, divided by the number of inmates for which the wards are licensed.

APPENDIX A.—TABLE XXVIII.

The Expenditure of District Lunacy Boards during the Financial Year 1903–1904, in Providing, Building, Repairing, and Fitting up and Furnishing District Asylums; and the amount of Monies Borrowed and Assessed for by District Lunacy Boards under the provisions of the Act 20 & 21 Vict. c. 71.

DISTRICT ASYLUMS.	Providing Expenditure from 15th May 1903 to 15th May 1904.											Amount of Monies Borrowed remaining due at 15th May 1904.	Assessments for Lunacy Purposes on the Landward parts of Counties and Burghs of each District in the year to 15th May 1904.	Amount of Assessment raised for, or applied to, Reduction of Debt.
	Land.			Buildings, Improvements, Alterations, and Additions.	Expenditure on Farm (Erection of Buildings and Improvements).	† Furniture and Furnishings.	Miscellaneous Expenses.	Interests on Monies Borrowed.	Total Expenditure under Heads 1 to 8.	‡ Deduct Proportion payable to the Providing Account of Profit on keeping Private Patients, Rent of Lands, &c.	Net Providing Expenditure excluding Instalments of Loans repaid. (See col. 14.)			
	Purchase of Land other than Feued Lands.	* Rent or Feu-duty of Asylum Grounds.	Total.											
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.
	£	£	£	£	£	£	£	£	£	£	£	£	£	£
1. Aberdeen, .	124	113	237	61,415	18	8,776	1,003	2,893	§74,342	372	73,970	111,593	7,612	2,634
2. {Argyll, ‖ .	.	170	170	2,948	.	352	445	484	4,399	147	4,246	14,157	2,800	827
{Bute, ‖ .	.	.	.	.	.	.	45	61	106	112		1,445	650	145
3. Ayr, . .	.	155	155	3,257	1,208	209	332	741	5,902	103	5,799	27,210	3,500	1,500
4. Banff, . .	.	24	24	2,781	.	185	465	190	3,645	12	3,633	11,630	982	90
5. Dundee, . .	.	560	560	**92,750	1,805	.	428	2,302	97,845	537	97,308	92,884	3,920	1,116
6. Edinburgh, .	.	322	322	43,770	87	2,296	1,569	2,899	50,943	670	50,273	128,407	6,500	3,523
7. Elgin, . .	.	32	32	243	.	35	75	314	699	167	532	7,811	1,000	447
8. Fife, . .	.	.	.	11,779	.	121	859	1,250	14,009	493	13,516	42,885	4,000	1,568
9. Glasgow (Gartloch),	.	19	19	11,296	102	988	1,984	6,936	21,325	428	20,897	163,865	20,600	21,609
10. ,, (Woodilee),	.	31	31	19,711	165	144	2,005	5,210	27,266	3,234	24,032	240,303	23,200	
11. Govan, .	.	10	10	3,942	533	684	582	6,421	12,172	823	11,349	194,252	17,510	8,720
12. Haddington, .	.	4	4	870	.	29	210	398	1,511	81	1,430	12,576	900	469
13. Inverness, .	.	393	393	6,048	2,953	282	8,589	2,301	20,566	711	19,855	75,548	6,500	2,676
14 Kirklands, .	.	64	64	3,360	.	750	148	.	4,322	119	4,203	.	2,010	.
15. Lanark, . .	.	107	107	2,648	103	64	1,615	5,594	10,131	2,222	7,909	193,329	17,150	9,932
16. Midlothian, .	73	184	257	3,073	360	154	319	2,221	6,384	481	5,903	75,044	7,500	2,717
17. Perth, . .	.	15	15	1,570	.	.	111	745	2,441	90	2,351	21,636	3,000	1,431
18. Renfrew, .	††48,047	17	48,064	598	.	.	786	2,639	52,087	991	51,096	52,000	.	.
19. Roxburgh, .	.	.	.	10,592	.	313	490	1,740	13,135	124	13,011	58,482	4,500	1,806
20. Stirling, . .	.	110	110	2,041	21	158	663	2,155	5,148	360	4,788	66,316	6,500	2,943
Totals, .	48,244	2,330	50,574	284,692	7,355	15,540	22,723	47,494	428,378	12,277	416,101	1,591,373	140,334	64,153

* Rents or feu-duties of farm lands proper form a part of the Maintenance Expenditure, and appear in Table XXXII., showing the receipts and expenses of Asylum farms.

† Under this heading appears such expenditure as is needed for the complete equipment of the Asylum and additions to it, and articles rendered necessary by increase of population. The Current Expenditure under this heading is given in the Table following.

‡ The profit from private patients is divided equally between the Providing and Maintenance Accounts.

§ Of this amount, a sum of £30,396 was paid to account of the cost of erection of the Asylum during the previous financial year.

‖ The Counties of Argyll and Bute, although served by one District Asylum, have separate District Lunacy Boards. The expenditure stated for Argyll Asylum under heads 1 to 6 inclusive is the combined expenditure of the two Boards; the transactions of each Board under other heads are, however, shown separately.

** This amount includes a sum of £90,000 paid by the Dundee District Lunacy Board to the Dundee Royal Asylum Corporation for Westgreen Asylum lands. The figures given for the year include sundry small expenses incurred by the District Board since its formation.

†† This amount is the sum paid for the Estate of Dykebar, purchased for the purpose of providing an Asylum and a farm for the Renfrew Lunacy District, and it is proposed to sell a portion of the estate not required for this purpose. The figures for the year include sundry small expenses incurred since the erection of the Renfrew District Board in November, 1902.

30.396
90 xxx
48.47

168,443

APPENDIX A.—

The Expenditure of District Boards of Lunacy on the Maintenance and

MAINTENANCE EXPENDITURE FROM

ASYLUMS.	Average Number of Patients Resident during the Financial Year.	1 Butcher Meat, Fresh, Cured, and Tinned; Condensed Preparations of Meat, Poultry, and Game.		2 Fish, Fresh and Cured.		3. Milk.		4. Butter, Suet, Lard, Eggs, and Cheese.		5. Bread, Flour, Meal, Barley, Pease, Rice, &c.		6. Potatoes, Green Vegetables, Turnips, &c.		7. Sugar.		8. Treacle.		9. Tea and Coffee.		10. Wines, Spirits, and Malt Liquors.		11. Fresh and Dry Fruits and Minor Articles of Food.		12. Tobacco.		13. Household Requisites.	
		Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Male Patient.	Total.	Per Patient.
		£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.
1. Argyll,	432	1380	3 3 11	239	0 11 1	1009	2 6 9	568	1 6 4	1021	2 7 3	326	0 15 7	136	0 6 4	1	0 0 1	227	0 10 6	16	0 0 9	83	0 3 10	124	0 11 11	163	0 4 9
2. Ayr,	520	1413	2 14 4	222	0 8 6	724	1 7 10	937	1 16 0	1385	2 13 3	4	0 19 0	145	0 5 7	14	0 0 6	288	0 11 1	24	0 0 11	134	0 5 2	142	0 11 3	160	0 6 2
3. Banff	175	470	2 13 9	35	0 4 0	363	2 1 6	207	1 3 8	540	3 1 9	7	0 11 1	38	0 4 4	.	.	61	0 7 0	28	0 3 2	29	0 3 4	37	0 8 3	40	0 4 7
4. Elgin,	172	504	2 18 7	38	0 4 5	217	1 5 3	197	1 2 11	352	2 0 11	110	0 12 9	53	0 6 2	7	0 0 10	84	0 9 9	41	0 4 9	69	0 8 0	51	0 13 9	85	0 9 11
5. Fife,	562	1870	3 6 7	98	0 3 6	871	1 11 0	909	1 12 4	1268	2 5 1	442	0 15 9	141	0 5 0	2	0 0 1	202	0 7 2	25	0 1 11	249	0 8 10	134	0 9 10	344	0 12 3
6. Glasgow (Gartloch),	636	2057	3 4 6	301	0 9 6	1314	2 1 4	1013	1 11 10	1717	2 14 0	631	0 19 10	281	0 8 10	18	0 0 7	380	0 11 11	39	0 1 3	308	0 9 8	157	0 9 6	359	0 11 3
7. Glasgow (Woodilee),	879	2839	3 4 7	569	0 12 11	1925	2 3 10	1379	1 11 5	1857	2 2 3	611	0 13 11	355	0 8 1	10	0 0 3	574	0 13 1	50	0 1 2	236	0 5 4	238	0 10 4	218	0 5 0
8. Govan,	480	1467	3 1 2	166	0 6 11	920	1 18 4	563	1 3 6	767	1 12 0	549	1 2 2	230	0 9 7	5	0 0 3	165	0 6 11	32	0 1 4	163	0 6 10	148	0 11 2	177	0 7 5
9. Haddington,	161	479	2 19 6	43	0 5 4	288	1 15 9	143	0 17 9	460	2 17 2	107	0 13 4	44	0 5 6	8	0 1 0	72	0 8 11	39	0 4 10	40	0 5 0	65	0 18 7	73	0 9 1
10. Inverness,	637	2270	3 11 3	225	0 7 1	1190	1 17 4	905	1 8 5	1736	2 14 6	498	0 15 8	189	0 5 11	6	0 0 2	34	0 10 9	[3]137	0 4 4	238	0 7 6	228	0 14 0	305	0 9 7
11. Kirklands,	215	529	2 9 3	81	0 7 6	336	1 11 3	267	1 4 10	466	2 3 4	214	0 19 11	59	0 5 6	4	0 0 5	101	0 9 5	77	0 7 2	95	0 8 10	54	0 9 9	75	0 7 0
12. Lanark,	877	2019	2 6 1	460	0 10 6	1434	1 12 8	762	0 17 5	1744	1 19 9	559	0 12 9	325	0 7 5	.	.	360	0 8 3	60	0 1 4	270	0 6 2	192	0 8 7	345	0 7 10
13. Midlothian,	334	676	2 0 6	99	0 5 11	598	1 15 10	577	1 14 7	970	2 18 1	216	0 12 11	102	0 6 1	4	0 0 3	142	0 8 6	36	0 2 2	124	0 7 5	64	0 7 10	137	0 8 2
14 Perth,	376	1309	3 9 8	106	0 5 8	518	1 7 7	427	1 2 9	1067	2 16 9	238	0 12 8	136	0 7 3	.	.	174	0 9 3	47	0 2 6	124	0 6 7	72	0 8 1	124	0 6 7
15. Roxburgh,	317	823	2 11 11	121	0 7 8	828	2 12 3	460	1 9 0	869	2 14 10	219	0 13 10	94	0 5 11	.	.	139	0 8 9	42	0 2 8	92	0 5 10	73	0 10 6	121	0 7 8
16. Stirling,	681	2275	3 6 10	220	0 6 6	1152	1 13 10	911	1 6 9	1488	2 3 8	491	0 14 5	254	0 7 6	17	0 0 6	331	0 9 9	67	0 2 0	252	0 7 5	211	0 11 6	503	0 14 9
Totals and Averages,	7454	22374	3 0 0	3023	0 8 1	13687	1 16 9	10225	1 7 5	17707	2 7 6	5812	0 15 7	2582	0 6 11	96	0 0 3	3642	0 9 9	790	0 2 1	2506	0 6 9	1990	0 10 7	3169	0 8 6

[1] General Notes.—(*a*) The expenses detailed in this Table relate solely to those payable out of the Poor Rate. The expenses in

(*b*) Fractions of 1d. which are under ½d. have been omitted, and all fractions above ½d. have been reckoned

The cost of furniture and furnishings included in this Table refers only to the replacement or repair of what has been worn

Two-thirds of the quantity of spirits purchased by Inverness Asylum were unexhausted at the close of the year, and remained

TABLE XXIX.

Management of Pauper Lunatics during the Financial Year 1903–1904.[1]

15TH MAY 1903 TO 15TH MAY 1904.

14. Laundry Requisites.		15. Clothing, Boots, and Shoes.		16. Medicines and Surgical Appliances.		17. Fuel, Light, and Water.		18. Salaries and Wages: of Officers.		of Attendants and Servants.		of Artisans.		Total of Salaries and Wages.		19. Fees, Taxes, Amusements, Funeral Expenses, Carriage of Articles, Conveyance, and Incidental Expenses.		20 Furniture and Furnishings.[2]		21. Total Maintenance Expenses.		22. Deduct or Add, as the Case may be:—Profit or Loss on Farm and Garden, Profit from keeping Private Patients, Receipts for Work done by Patients or Attendants other than for Asylums, &c.	23. Net Maintenance Expenses.		ASYLUMS.
Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.		Total.	Per Patient.	
£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£	£ s. d.	
65	0 3 0	520	1 4 1	57	0 2 8	1155	2 13 6	1273	2 18 11	1701	3 18 9	261	0 12 1	3235	7 9 9	466	1 1 7	285	0 13 2	11026	25 10 6	— 273	10753	24 17 10	1. Argyll.
191	0 7 4	1023	1 19 4	141	0 5 5	1749	3 7 3	1526	2 18 8	1993	3 16 8	347	0 13 4	3866	7 8 8	566	1 1 9	761	1 9 3	14379	27 13 0	— 155	14224	27 7 1	2. Ayr.
61	0 7 0	279	1 11 11	72	0 8 3	608	3 9 6	422	2 8 3	557	3 3 8	67	0 7 8	1046	5 19 7	112	0 12 10	128	0 14 8	4251	24 5 10	— 431	3820	21 16 7	3. Banff.
40	0 4 8	266	1 10 11	46	0 5 4	413	2 8 0	385	2 4 9	602	3 10 0	.	.	987	5 14 9	162	0 18 10	168	0 19 6	3890	22 12 4	— 36	3854	22 8 2	4. Elgin.
364	0 12 11	1355	2 8 3	198	0 7 1	1403	2 9 11	1308	2 6 6	2018	3 11 10	410	0 14 7	3736	6 12 11	1044	1 17 2	702	1 5 0	15387	27 7 7	— 969	14418	25 13 1	5. Fife.
181	0 5 8	1298	2 0 10	431	0 13 7	2753	4 6 7	1865	2 18 8	3796	5 19 4	207	0 6 6	5868	9 4 6	1247	1 19 3	720	1 2 8	21067	33 2 6	— 53	21014	33 0 10	6. Glasgow (Gartloch).
294	0 6 8	1718	1 19 1	427	0 9 9	2256	2 11 4	2746	3 2 6	4817	5 9 7	607	0 13 10	8170	9 5 11	1231	1 8 0	1471	1 13 6	26428	30 1 4	— 217	26211	29 16 5	7. Glasgow (Woodilee).
175	0 7 4	1048	2 3 8	154	0 6 5	2009	4 3 9	1553	3 4 9	2706	5 12 9	124	0 5 2	4383	9 2 8	1132	2 7 2	290	0 12 1	14543	30 6 0	— 21	14522	30 5 1	8. Govan.
38	0 4 9	251	1 11 2	41	0 5 1	277	1 14 5	485	3 0 3	498	3 1 10	.	.	983	6 2 1	270	1 13 6	143	0 17 9	3864	24 0 0	— 301	3563	22 2 7	9. Haddington.
143	0 4 6	1166	1 16 7	95	0 3 0	1734	2 14 5	1648	2 11 9	2645	4 3 0	291	0 9 2	4584	7 3 11	839	1 6 4	795	1 5 0	17625	27 13 5	— 733	16892	26 10 4	10. Inverness.
90	0 8 4	362	1 13 8	109	0 10 2	430	2 0 0	756	3 10 4	771	3 11 9	70	0 6 6	1597	7 8 7	363	1 13 9	172	0 16 0	5481	25 9 10	— 39	5442	25 6 3	11. Kirklands.
149	0 3 5	1414	1 12 3	326	0 7 5	1665	1 18 0	1966	2 4 10	3729	4 5 1	271	0 6 2	5966	6 16 1	874	0 19 11	772	0 17 7	19696	22 9 2	— 516	19180	21 17 5	12 Lanark.
86	0 5 2	672	2 0 3	76	0 4 7	686	2 1 1	1142	3 8 5	1357	4 1 3	180	0 10 9	2679	8 0 5	1084	3 4 11	1110	3 6 6	10138	30 7 1	— 408	9730	29 2 8	13. Midlothian.
161	0 8 7	560	1 9 9	86	0 4 7	991	2 12 9	1140	3 0 8	1318	3 10 1	353	0 18 9	2811	7 9 6	527	1 8 0	464	1 4 8	9942	26 8 10	— 124	9818	26 2 3	14. Perth.
126	0 7 11	662	2 1 9	75	0 4 9	1095	3 9 1	1296	4 1 9	1152	3 12 8	169	0 10 8	2617	8 5 1	538	1 13 11	554	1 14 11	9548	30 2 5	— 138	9410	29 13 8	15. Roxburgh.
260	0 7 8	1469	2 3 2	315	0 9 3	1799	2 12 10	1754	2 11 6	2872	4 4 4	578	0 17 0	5204	7 12 10	1369	2 0 2	862	1 5 4	19450	28 11 3	— 180	19270	28 5 11	16. Stirling.
2424	0 6 6	14063	1 17 9	2649	0 7 1	21023	2 16 5	21265	2 17 7	32532	4 7 3	3935	0 10 7	57732	7 14 11	11824	1 11 9	9397	1 5 3	206315	27 13 7	—4594	202121	27 2 4	Totals and Averages.

connection with land, buildings, furnishings, &c., payable out of the County Assessments, are given in the Table preceding.

as ld.

out or destroyed. The cost of furniture and furnishings required for original buildings or additions is given in the Table preceding

in bond.

APPENDIX A.—

The Quantity per Inmate of the various Articles of Dietary, and of Tobacco and Fuel, supplied

ASYLUMS	Average Number of Inmates.			1. Fresh Butcher Meat.		2. Cured Butcher Meat.		3. Tinned Butcher Meat.		4. Poultry and Game.		5. Fresh Fish.		6. Cured Fish.		7. Unskimmed Milk.		8. Skimmed Milk.		9. Butter.		10. Suet, Lard, &c.		11. Eggs.		12. Cheese.		13. Bread.		14. Flour.	
	Patients.	Officers and Servants Boarded.	Total.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per gal.	Quantity per Inmate.	Price per gal.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.
				lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	gals.	£ s. d.	gals.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.
1. Argyll,	432	67	499	104	2 10 9	2	3 13 5	16	2 7 7	(2)	.	15	0 12 0	43	1 1 1	49	0 0 10	.	.	16	4 6 8	5	1 14 4	6	4 7 9	11	2 6 6	11	0 12 7	289	0 10 7
2. Ayr,	520	78	598	87	2 4 7	2	4 1 4	22	2 14 10	(2)	.	31	1 5 3	2	1 12 1	39	0 0 8	.	.	23	5 0 8	6	1 10 10	4	3 14 11	11	3 3 10	142	0 10 7	217	0 10 0
3. Banff,	175	26	201	84	2 18 9	(2)	.	.	.	7	2 2 3	16	1 0 7	3	1 3 5	43	0 0 10	.	.	11	5 16 2	3	2 16 0	9	2 16 0	11	1 12 7	413	0 9 9	8	0 13 5
4. Elgin,	172	27	199	94	2 17 10	1	5 13 2	.	.	2	2 18 11	10	1 3 9	8	1 2 11	33	0 0 8	.	.	10	5 8 10	7	2 2 7	5	3 10 0	11	2 3 8	319	0 8 9	19	1 1 1
5. Fife,	562	81	643	100	2 14 0	(2)	.	16	3 7 3	(2)	.	20	0 12 8	4	1 1 11	36	0 0 9	.	.	14	5 2 11	6	2 11 11	6	3 19 5	18	2 10 2	.	.	280	0 10 10
6. Glasgow (Gartloch),	636	150	786	101	2 9 3	4	3 14 10	10	2 12 2	1	2 9 4	32	1 0 1	8	1 5 7	40	0 0 10	(2)	.	27	3 8 4	(2)	.	7	3 10 10	10	2 15 1	357	0 10 3	17	0 9 6
7. Glasgow (Woodilee),	879	177	1,056	95	2 10 1	4	3 14 2	15	2 16 0	2	3 8 4	44	1 0 3	14	1 2 2	44	0 0 10	.	.	22	3 12 0	(2)	.	14	3 8 9	6	2 13 0	92	0 10 8	212	0 8 10
8. Govan,	480	84	564	112	2 7 0	8	3 4 0	.	.	1	4 14 11	21	0 15 4	13	1 6 3	43	0 0 9	.	.	20	3 13 3	3	1 19 4	6	3 13 2	4	2 16 1	.	.	221	0 8 10
9. Haddington,	161	21	182	83	3 6 7	4	3 4 5	.	.	3	2 16 0	23	1 2 5	(2)	.	38	0 0 10	.	.	7	6 9 11	4	2 16 0	6	4 0 7	1	3 0 9	350	0 10 3	20	0 10 10
10. Inverness,	637	107	744	120	2 14 9	2	4 12 0	1	2 1 8	1	3 3 5	35	0 19 6	.	.	48	0 0 8	.	.	23	4 5 3	4	2 16 9	4	2 19 5	5	2 16 0	353	0 9 8	28	0 10 2
11. Kirklands,	215	26	241	84	2 7 1	3	3 15 3	11	2 18 5	(2)	.	31	0 19 7	12	0 11 3	38	0 0 9	.	.	17	3 9 7	3	1 9 2	8	3 15 5	12	2 11 5	314	0 9 5	24	0 10 11
12. Lanark,	877	135	1,012	92	2 6 1	2	3 6 6	2	2 9 9	(2)	.	21	1 4 8	27	0 19 3	40	0 0 9	(2)	.	18	3 8 10	5	1 15 0	1	4 7 1	3	3 0 7	4	0 11 8	247	0 10 3
13. Midlothian,	334	50	384	76	2 6 11	1	3 11 2	5	2 15 8	1	2 16 0	29	0 16 11	2	1 13 3	37	0 0 10	.	.	14	5 10 2	4	2 1 8	12	3 14 11	12	2 19 10	417	0 9 11	20	0 10 2
14. Perth,	376	60	436	96	2 12 3	6	4 0 11	23	2 13 7	(2)	.	29	0 15 9	3	1 3 5	33	0 0 9	.	.	16	3 11 11	2	2 3 9	8	3 2 3	11	2 2 1	374	0 10 6	19	0 9 7
15. Roxburgh,	317	41	358	78	2 13 0	3	3 11 8	15	2 13 1	(2)	.	43	0 17 7	(2)	.	53	0 0 11	.	.	19	5 1 4	3	1 15 10	4	3 8 5	9	2 19 11	353	0 11 2	14	0 10 5
16. Stirling,	681	122	803	117	2 6 6	3	4 5 9	9	2 11 6	1	4 5 9	31	0 15 9	5	1 5 1	36	0 0 9	(2)	.	22	3 11 10	2	2 2 6	8	3 13 6	8	1 19 8	.	.	306	0 9 3
Totals & Averages,	7454	1252	8706	95	2 11 7	3	3 17 9	12	2 13 6	2	3 3 11	27	0 18 11	11	1 3 8	41	0 0 9	.	.	17	4 9 10	4	2 2 7	7	3 12 8	9	2 11 11	361 62	0 10 5	253 19	0 9 8

(1) These figures are the Averages of the quantities of bread and flour used respectively in asylums which do, and which do not, bake their own bread. For purposes of comparison, it may be

(2) In the cases marked thus, the article also formed part of the asylum dietary,

(3) Two-thirds of the quantity of sptrits purchased by Inverness Asylum were unexhausted at the close of the

TABLE XXX.

to each District Asylum during the Financial Year 1903–1904, and the Price of each Article supplied.

15. Meal.		16. Barley.		17. Peas, &c.		18. Rice, &c.		19. Potatoes.		20. Green Vegetables, Turnips, &c.		21. Fresh Fruits.		22. Dry Fruits.		23. Sugar.		24. Treacle.		25. Tea.		26. Wines and Spirits.		27 Malt Liquors.		28 Tobacco.		29. Fuel.		ASYLUMS.
Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per gal.	Quantity per Inmate.	Price per gal.	Quantity per Male Patient.	Price per cwt.	Quantity per Inmate.	Price per ton.	
lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	gills.	£ s. d.	pints.	£ s. d.	ozs.	£ s. d.	cwts.	£ s. d.	
77	0 11 1	16	0 8 8	6	0 10 3	27	0 12 0	224	0 3 9	125	0 5 4	2	1 2 0	4	1 3 5	39	0 15 8	(2) .	.	7	7 13 4	1	0 16 0	.	.	53	20 4 8	63	0 11 6	1. Argyll.
68	0 12 4	6	0 9 2	29	0 11 9	23	0 12 6	317	0 4 7	83	0 4 8	3	1 18 6	3	1 2 0	33	0 16 3	4	0 11 7	5	8 8 2	2	0 17 0	.	.	51	19 12 8	65	0 9 3	2. Ayr.
126	0 10 7	14	0 9 0	23	0 10 11	12	0 13 8	231	0 3 3	58	0 5 8	5	0 19 10	2	2 6 1	25	0 17 2	.	.	4	8 8 0	3	0 18 5	11	0 0 9	36	20 17 6	51	0 17 4	3. Banff.
46	0 11 4	17	0 6 11	9	0 7 8	6	0 9 8	229	0 3 0	103	0 5 4	6	1 2 11	3	1 14 3	41	0 14 5	8	0 10 4	7	6 9 8	4	0 16 1	26	0 0 8	63	19 14 9	32	0 17 7	4 Elgin.
80	0 11 4	12	0 8 0	19	0 11 4	15	0 11 6	259	0 4 0	104	0 4 9	2	1 7 4	7	1 8 5	31	0 15 10	1	0 9 6	5	6 17 8	3	0 16 0	1	0 1 10	42	21 3 3	83	0 8 2	5. Fife.
51	0 11 9	11	0 8 2	17	0 10 4	18	0 11 2	317	0 4 5	96	0 4 1	11	0 11 8	7	1 5 4	49	0 16 2	4	0 12 1	6	7 18 2	2	0 15 10	1	0 2 0	45	18 15 10	112	0 8 4	6. Glasgow (Gartloch).
47	0 12 10	9	0 8 2	23	0 10 8	14	0 12 0	207	0 4 6	110	0 3 4	4	1 0 0	4	1 2 8	47	0 16 2	2	0 12 8	7	7 18 3	2	0 17 7	(3) .	.	48	19 2 1	68	0 8 9	7. Glasgow (Woodilee).
62	0 11 9	5	0 8 2	5	0 9 2	26	0 10 11	298	0 4 7	77	0 10 6	2	1 5 7	2	0 11 0	55	0 16 6	1	1 1 5	4	7 9 4	2	0 17 8	(2) .	.	53	18 18 7	116	0 7 9	8. Govan.
100	0 14 4	19	0 8 3	12	0 9 8	12	0 11 3	166	0 4 3	108	0 5 7	8	1 0 0	2	1 17 4	30	0 18 4	10	0 10 1	4	10 5 4	4	0 16 11	19	0 0 11	76	21 17 9	53	0 10 10	9. Haddington.
83	0 12 4	20	0 8 4	20	0 11 0	24	0 11 1	236	0 4 1	74	0 7 3	9	0 17 11	3	1 15 9	34	0 17 0	1	1 1 0	6	7 18 5	8	0 9 8(3)	6	0 1 7	60	20 15 4	64	0 14 7	10. Inverness.
68	0 11 5	7	0 9 1	15	0 11 6	6	0 16 2	295	0 4 9	144	0 4 2	21	0 9 7	4	1 10 10	34	0 16 2	2	1 2 11	6	6 13 7	9	0 18 0	6	0 2 0	41	21 1 6	64	0 8 4	11. Kirklands.
64	0 12 5	7	0 8 6	23	0 11 3	11	0 15 8	215	0 4 0	86	0 4 4	8	0 15 0	7	1 7 2	43	0 16 8	.	.	5	7 9 0	1	0 15 5	3	0 2 1	41	18 17 10	87	0 7 2	12. Lanark.
70	0 12 4	10	0 8 3	20	0 10 8	11	0 14 5	293	0 2 10	118	0 3 7	5	1 14 6	4	1 13 11	35	0 16 10	2	0 15 9	5	7 9 4	4	0 11 8	3	0 1 3	36	19 11 11	94	0 7 7	13. Midlothian.
73	0 11 3	10	0 8 8	24	0 11 8	15	0 11 5	141	0 2 6	153	0 5 8	9	0 19 0	3	1 5 5	43	0 16 5	(2) .	.	6	7 10 8	2	0 11 2	16	0 0 9	38	18 18 7	57	0 13 0	14. Perth.
66	0 12 7	10	0 8 7	24	0 10 9	12	0 13 11	205	0 4 4	95	0 5 1	6	1 2 8	3	1 7 9	36	0 16 6	(2) .	.	7	6 11 2	(2) .	.	10	0 1 7	46	20 11 5	104	0 11 1	15. Roxburgh.
65	0 12 2	17	0 7 11	14	0 9 4	17	0 12 6	205	0 3 8	171	0 3 8	5	1 11 1	4	1 11 1	44	0 16 0	3	0 14 8	5	6 11 1	2	0 15 11	3	0 2 1	53	19 6 11	77	0 7 0	16. Stirling.
72	0 12 0	12	0 8 4	18	0 10 6	16	0 12 6	240	0 3 11	107	0 5 2	7	1 2 4	4	1 8 11	39	0 16 5	3	0 14 9	6	7 11 11	3	0 15 7	9	0 1 6	49	19 19 5	74	0 10 6	Totals & Averages.

estimated that the quantity as given in Col. 14 may be increased by a little less than 40 per cent. to show the weight of bread per inmate which would be produced from the amount of flour used.

but the quantity used was below 1 lb. or 1 gallon per inmate during the year.

year, and remained in bond, thus accounting for the large quantity per inmate and the low price per gallon

Quantities and Estimated Values of Articles supplied to District Asylums from Asylum Farms and Gardens during the Financial Year 1903–1904; and the Prices at which the Produce supplied has been Estimated.

Farms and Gardens* of District Asylums.	Quantities and Estimated Values of Supplies to Asylums from Asylum Farms and Gardens.																Prices at which Produce supplied to Asylums has been Estimated.							Farms and Gardens* of District Asylums
	Butcher Meat.		Poultry and Game.		Milk.		Butter.		Eggs.		Potatoes.		Green Vegetables.		Fresh Fruits.		Sundries.	Total Estimated Value.	Butcher Meat.	Poultry and Game.	Milk.	Butter.	Eggs.	Potatoes.	Green Vegetables.	Fresh Fruits.	
	cwt.	£	lbs.	£	gals.	£	lbs.	£	lbs.	£	cwt.	£	cwt.	£	lbs.	£	£	£	per cwt. £ s. d.	per cwt. £ s. d.	per gal. £ s. d.	per cwt. £ s. d.	per cwt. £ s. d.	per cwt. £ s. d.	per cwt. £ s. d.	per cwt. £ s. d.	
1. Argyll,	201	489	98	3	24240	1009	.	.	648	17	262	50	553	146	522	4	113	1831	2 8 8	3 8 7	0 0 10	.	2 18 9	0 3 10	0 5 3	0 17 2	1. Argyll.
2. Ayr,	.	.	.	.	.	.	.	.	.	.	.	.	336	90	676	16	.	106	.	.	.	.	.	.	0 5 4	2 13 0	2. Ayr.
3. Banff,	81	247	1432	27	8705	363	.	.	1713	43	414	68	104	29	802	8	109	894	3 1 0	2 2 3	0 0 10	.	2 16 3	0 3 3	0 5 7	1 2 4	3. Banff.
4. Elgin,	.	.	321	8	6514	217	.	.	933	28	407	61	184	49	708	5	.	368	.	2 15 10	0 0 8	.	3 7 3	0 3 0	0 5 4	0 15 10	4. Elgin.
5. Fife,	593	1600	.	.	23234	871	.	.	.	.	1486	299	598	143	859	12	37	2962	2 14 0	.	0 0 9	.	.	0 4 0	0 4 9	1 11 4	5. Fife.
6. Glasgow (Gartloch),	675	1672	752	19	31756	1314	1137	66	2591	90	1087	236	635	127	371	5	598	4127	2 9 6	2 16 7	0 0 10	6 10 0	3 17 10	0 4 6	0 4 0	1 10 2	6. Glasgow (Gartloch),
7. Glasgow (Woodilee),	828	2119	418	20	46196	1925	156	9	2467	103	1621	360	1032	172	892	9	627	5344	2 11 2	5 7 2	0 0 10	6 9 3	4 13 6	0 4 5	0 3 4	1 2 7	7. Glasgow Woodilee),
8. Govan	.	.	185	8	24531	920	315	21	1622	55	637	144	368	197	.	.	270	1615	.	4 16 10	0 0 9	7 9 4	3 15 11	0 4 6	0 10 8	.	8. Govan.
9. Haddington,	24	88	515	13	6916	288	.	.	1149	41	270	58	167	45	1120	10	40	583	3 13 4	2 16 7	0 0 10	.	3 19 11	0 4 4	0 5 5	1 0 0	9. Haddington.
10. Inverness,	534	1536	195	6	33617	1121	.	.	202	5	1407	287	494	175	5049	39	51	3220	2 17 6	3 8 11	0 0 8	.	2 15 5	0 4 1	0 7 1	0 17 4	10. Inverness
11. *Kirklands,	3	11	35	1	.	.	.	.	205	8	410	94	305	62	4690	18	.	194	3 13 4	3 4 0	.	.	4 7 5	0 4 7	0 4 1	0 8 7	11. *Kirklands.
12. Lanark,	6	14	347	9	40699	1434	945	55	1160	45	423	70	739	158	789	9	45	1839	2 6 8	2 18 1	0 0 8	6 10 4	4 6 11	0 3 4	0 4 3	1 5 7	12. Lanark.
13. Midlothian,	.	.	220	6	14360	598	.	.	938	37	927	128	352	57	1301	22	133	981	.	3 1 1	0 0 10	.	4 8 4	0 2 9	0 3 3	1 17 11	13. Midlothian.
14. Perth,	.	.	.	.	12426	440	.	.	.	.	550	68	596	169	1677	19	30	726	.	.	0 0 8	.	.	0 2 6	0 5 8	1 5 5	14. Perth.
15. *Roxburgh,	31	76	.	.	.	.	.	.	.	.	95	17	305	78	354	7	.	178	2 9 0	.	.	.	.	0 3 7	0 5 1	2 4 4	15. *Roxburgh.
16. Stirling,	.	.	.	.	.	.	.	.	35	1	1345	240	1120	203	2584	32	80	556	.	.	.	.	3 4 0	0 3 7	0 3 8	1 7 9	16. Stirling.
Totals and Averages,	2976	7852	4518	120	273194	10500	2553	151	13663	473	11341	2180	7888	1900	22394	215	2133	25524	2 12 9	2 19 6	0 0 9	6 12 6	3 17 7	0 3 10	0 4 10	1 1 6	Totals and Averages.

* Those marked with an asterisk are gardens only.

APPENDIX A.—TABLE XXXII.

Acreage of Farms attached to District Asylums; Receipts and Expenses of such Farms and Gardens during the Financial Year 1903–1904; and Profit shown on the Year's Transactions.

FARMS AND GARDENS * OF DISTRICT ASYLUMS.	Acreage of Farm and Garden.			Receipts.														Expenditure.											Profit + or Loss—.
	Arable or in Permanent Pasture.	Non-Arable.	Total.	1. Valuation of Stock at 15th May 1904.	2. Butcher Meat.	3. Poultry and Game.	4. Milk.	5. Butter and Cheese.	6. Eggs.	7. Potatoes.	8. Green Vegetables.	9. Fresh Fruits.	10. Grain.	11. Live Stock.	12. Wool, Hides, Skins.	13. Grazing, Cartage, and Sundries.	14. Total.	1. Valuation of Stock at 15th May 1902.	2. Rents.	3. Interest on Unrepaid Outlay from Providing Account of Stock and Implements.	4. Live Stock.	5. Implements and Harness.	6. Seeds and Plants.	7. Fodder, Grain, Roots, and Feeding Stuffs.	8. Manures.	9. Paid Labour.	10. Miscellaneous.	11. Total.	
	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
1. Argyll, . . .	20	19	39	1102	489	3	1023	.	17	50	146	4	.	224	26	192	3276	1118	40	55	481	16	37	1039	.	178	163	3127	+ 149
2. Ayr, . . .	80	12	92	180	.	.	.	.	.	.	90	16	.	676	.	67	1029	165	100	.	400	21	58	96	20	29	.	889	+ 140
3. Banff, . . .	206	10	216	1397	268	27	363	.	43	76	29	8	212	267	21	12	2723	1477	156	.	179	53	31	125	88	144	52	2305	+ 418
4. Elgin, . . .	154	9	163	949	.	8	217	.	28	61	52	5	177	427	1	38	1963	911	321	.	322	40	46	55	60	79	114	1948	+ 15
5. Fife, . . .	233	7	240	1599	1628	.	878	.	.	299	143	12	199	236	113	48	5155	1866	392	.	850	44	159	417	30	437	120	4315	+ 840
6. Glasgow (Gartloch), .	263	145	405	2774	1672	19	1409	66	96	236	127	5	37	213	139	629	7422	2537	277	27	1975	198	195	890	225	860	252	7436	— 14
7. Glasgow (Woodilee), .	586	10	596	3855	2170	20	2078	9	105	360	172	9	286	448	174	396	10082	3802	698	.	2014	420	242	1281	345	871	242	9915	+ 167
8. Govan, . . .	229	66	295	2500	21	14	1772	.	55	144	197	.	30	631	.	270	5634	2712	410	47	531	62	133	796	106	540	401	5738	— 104
9. Haddington, . .	135	6	141	1145	88	13	288	.	41	121	45	10	242	953	.	†253	3199	1169	656	.	636	52	52	102	66	191	30	2954	+ 245
10. Inverness, . .	312	60	372	2699	1536	6	1126	.	5	288	175	39	162	382	55	106	6579	1174	437	88	2252	222	778	381	108	380	80.	5900	+ 679
11. *Kirklands, . .	15	.	15	.	11	1	.	.	8	94	62	18	.	128	.	24	346	.	35	.	34	3	70	41	23	113	.	319	+ 27
12. Lanark, . .	246	325	571	2237	14	.	1434	55	45	70	158	9	3	1947	31	99	6102	2255	200	.	1547	52	38	1064	150	366	190	5862	+ 240
13. Midlothian, . .	235	3	238	1828	.	6	646	.	37	128	126	22	.	1180	.	326	4299	1752	276	.	1120	100	68	216	194	431	175	4332	— 33
14. Perth, . . .	80	8	88	533	.	.	440	.	.	68	169	50	8	218	.	30	1516	429	50	.	258	31	41	441	24	126	12	1412	+ 104
15. *Roxburgh, . .	38	18	56	179	76	.	.	.	.	17	78	7	.	81	10	25	471	132	.	.	119	25	39	.	32	60	8	415	+ 56
16. Stirling, . .	69	.	69	1039	.	.	.	.	1	240	203	35	.	948	5	84	2555	1048	156	.	311	72	140	386	69	226	129	2537	+ 18
Totals and Averages	2901	698	3599	24016	7973	117	11674	130	481	2252	1972	249	1356	8959	575	2597	62351	22547	4204	217	13029	1411	2127	7330	1540	5031	1968	59404	+2947

* Those marked with an asterisk are Gardens only.

† Includes Rent of House £22, and Sale of Stones from Quarry.

APPENDIX B.

ENTRIES MADE BY THE COMMISSIONERS IN THE PATIENTS' BOOK OF ASYLUMS AND POORHOUSES.

ROYAL AND DISTRICT ASYLUMS.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

ABERDEEN ROYAL ASYLUM,
22*nd*, 23*rd*, *and* 24*th March* 1904.

Aberdeen Royal Asylum.

The following statement shows the present state of the population of the asylum and the changes that have occurred since last visit :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On Register 13th July 1903,	126	138	344	384	992
Admitted, . . .	33	38	76	71	218
Discharged recovered, .	12	19	24	27	82
Discharged unrecovered,	5	1	30	32	68
Died, ...	7	11	24	16	58
On Register 22nd March 1904,	135	145	342	380	1002

In the above figures effect has been given to the transference since last visit of three males and four females from the private to the pauper list, and of four males and two females from the pauper to the private list. Of the 1002 patients on the register of the asylum 7 men and 7 women were absent on probation. All the others were seen in course of the visit. One of the male private patients is a voluntary inmate.

The causes of death are registered as follows :—Ten patients died of gross disease of the brain and nervous system, 7 of general paralysis, 6 of heart disease, 6 of phthisis, 6 of epilepsy, 5 of pneumonia, 5 of cancer, 5 of exhaustion from acute mental disease, 2 of senile decay, and one of each of the following diseases, namely :—pernicious anæmia, bronchitis, erysipelas, strangulated hernia, stricture of the œsophagus and a wound in the throat self inflicted prior to admission. *Post mortem* examinations were made in 25 instances, or in less than half of the number of deaths.

There are 4 entries in the Register of Accidents, which refer to a fracture of the left wrist and a burn on the left side of the head and face in two female patients respectively, and to the sudden death through cardiac syncope of two male patients. A record of all minor accidents and bruises is systematically kept in a special book.

There are 149 entries in the Register of Restraint and Seclusion, which refer to the restraint of two persons and the seclusion of two persons.

The changes in the nursing staff since last visit have been as follows :—4 men and 17 women have resigned, 1 man has been dismissed, and 9 men and 18 women have been engaged.

In the branch asylum at Daviot there are 106 patients—60 men and 46 women. These patients are selected on account of their physical capability for work and their suitability for management in a home which possesses none of the ordinary methods for the prevention of escape or the control of excited patients. All the inmates of this establishment are engaged in useful

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Aberdeen Royal Asylum.

work. They were free from excitement, and no manifestation of discontent or complaint was observed among them. They were neatly and suitably dressed, and the dinner which was seen on the day of the visit was an ample and apparently popular meal.

The private establishment for patients paying the higher rates of board at Elmhill was found in excellent order. The newly renovated dining-room is a distinct success, and not only adds to the comfort but varies the daily life of the inmates by bringing them into association. The two large rooms at the extreme ends of the main corridor have been converted into sick wards for ladies and gentlemen respectively. The gentlemen's sick-room has been placed under the charge of female nurses, a change which has undoubtedly added to the comfort of the sick patients and placed the private patients at the same advantage with regard to nursing as the pauper patients in the main asylum.

The beneficial effect of placing the male sick-room in the main hospital under the charge of female nurses was referred to in the previous entry, and the remarks there made are cordially concurred in. Since then Dr. Reid has placed female nurses in charge of the smaller sick-room on the male side which is intended for the treatment of physically sick and of senile cases. All the recent and acute male cases in the asylum (with the exception of the few who are found unsuitable for this form of treatment) are more or less under the direct charge of female nurses. This change is so progressive and, it is believed, so beneficial that Dr. Reid may be congratulated upon its success.

There was considerable excitement among a section of the female patients in the old asylum, and a large number of the male patients demanded interviews which, in the majority of instances, were accorded. These symptons of unrest are probably attributable to the state of the accommodation which is too limited for the number of patients occupying it, and not equipped to meet the requirements of a modern asylum. In these circumstances it is gratifying to be able to announce that in less than two months 100 of the patients will be removed to the new City Asylum at Kingseat. It is also learned with satisfaction that the Directors are about to proceed with the alteration and renovation of the older portions of the asylum.

With the exceptions mentioned above the general care and treatment of the patients and the administration of the asylum as a whole produced a very favourable impression. The main hospital, which is the central medical portion of the institution, is furnished with all the more modern appliances for the medical care and welfare of curable and sick cases. It was seen with approval that a large proportion of the recent acute cases were being treated by rest in bed. In addition to the accommodation for sick patients, the convalescent wards are bright, cheerful rooms, elegantly furnished, and containing many means of recreation and amusement, among which may be mentioned billiard tables and pianos.

The books and registers were examined and found correct.

ABERDEEN ROYAL ASYLUM,
15th, 16th, and 17th August 1904.

There were on the 15th instant 877 patients, 413 males and 464 females, on the registers of the asylum. Of these, 1 male is a voluntary boarder, 129 males and 144 females are private patients, and 283 males and 320 females are paupers. Since last visit 2 males and 2 females have been removed from the private to the pauper list, and 5 males and 2 females have been transferred from the pauper to the private list. There are 17 patients absent on statutory probation. All in residence, 860 in number, were seen, and to several patients special interviews were granted.

The following changes have taken place in the population since 22nd March 1904:—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted, ...	13	14	36	30	93
Discharged recovered, . .	13	8	12	17	50
Discharged unrecovered, .	2	5	72	67	146
Died, ...	7	2	8	6	23

Two gentlemen have been admitted as voluntary boarders and 2 have left.

Of the 139 paupers discharged unrecovered, 4 were sent to the care of relatives, 102 were transferred to the Kingseat Asylum, 3 to other asylums, 25 to the lunatic wards of the Aberdeen Poorhouses, and 5 to the wards of other poorhouses. As a result of these and other changes the number of male paupers has decreased by 59, and that of the female paupers by 60. Were it not for the transfers to Kingseat Asylum and Aberdeen Poorhouses there would have been an increase of 8 in the number of paupers. At this date there are in the asylum 129 patients chargeable to the Aberdeen City Parish.

The ratio of recoveries has been high, being 53·6 per cent. on the admissions. The rate of mortality has been low, and all the deaths were the result of natural and ordinary causes. They are registered as due to exhaustion from acute mental affections in 4 cases, to broncho-pneumonia in 3 cases, to cardiac disease in 2 cases, to organic brain disease in 2 cases, to general paralysis in 3 cases, to senile asthenia in 2 cases, and to erysipelas and intestinal obstruction each in 1 case. In 8 instances, or in 35 per cent. of the deaths, a *post mortem* examination was made. This percentage is much lower than that of Scottish asylums generally.

The Register of Restraint and Seclusion contains 91 entries. Mechanical restraint in the form of armstraps has been employed for 2 hours on 82 occasions in the case of a patient who is impulsive and suicidal, and 9 entries refer to the use of seclusion in the treatment of a female patient who is the subject of maniacal attacks of a dangerous character. Two accidents are recorded, (1) a fracture of a collar bone caused by a fall, and (2) fracture of both bones of the right forearm sustained by a laundrymaid while attempting to extract clothing from a wringer while in motion. In both cases recovery was satisfactory. All minor casualties are now fully entered in a separate register, which ensures that their causes are enquired into. There have been 4 escapes in which the patients were absent for at least one night before being brought back.

The following are the changes among the staff :—2 attendants and 12 nurses have resigned, 6 attendants and 11 nurses have been engaged, and 1 attendant has been dismissed for misconduct not affecting the patients. An extension of female nursing in the male divisions is recorded with satisfaction. A ward in the hospital with eleven beds is now occupied by infirm and senile male patients, and has been placed under the charge of two nurses. At Elmhill sick and senile cases are now cared for by nurses. The staff of the main sickroom consists of a head nurse, 3 nurses, and an attendant. It was strikingly evident that this change in the nursing arrangements is a great success and is most acceptable to the patients—in fact, so much is this the case that the inmates of these wards oppose being removed to wards under the charge of male attendants. Better testimony than this of the benefits and efficiency of female nursing cannot be adduced. This new feature in administration constitutes the most valuable and important advance in the treatment of the insane during recent years.

The extension and reconstruction of the south-east female section of the main asylum are now in progress. The plans show that when completed there will be three large dayrooms, a dormitory on the ground floor, two bathrooms, three lavatories, and ample watercloset and linen accommodation. Three exits from the dormitory floor of this section are being provided. As to the improvement in the comforts of the patients, and in the facilities of administration which will be effected by this reconstruction, there can be no doubt. A hope is expressed that this work will be pushed on with all possible speed, as the patients displaced from this section cause serious overcrowding in the other wards. The female workroom, which is the outcome of the first stage of reconstructing the main asylum, always attracts favourable attention on account of its spaciousness and brightness. If the section now in process of alteration and the whole of the main building are reconstructed on similar lines, the accommodation of the institution will be brought up to the highest standard.

The condition of the patients was in every respect highly satisfactory. As usual a few were excited and noisy, but speaking generally they were orderly and contented. They were also free from any reasonable complaints, and were evidently on good terms with Dr. Reid, under whose management it is clear that they are kindly and judiciously treated. The patients at Elmhill

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had every appearance of being comfortably and liberally provided for, and of having their individual requirements carefully attended to. Recently admitted patients and those who are sick and convalescent have in the hospital wards surroundings which are unrivalled as to excellence and which cannot fail to have a soothing or curative effect on their mental condition. The overcrowding of the male wards of the main asylum has been lessened by removals to Kingseat. It is regretted that financial considerations require in the meanwhile the postponement of the reconstruction of these dingy wards and their many antiquated arrangements.

The Daviot Branch continues to be maintained in excellent order and to provide a healthy country home for a class of the chronic insane. The number resident there is 109, among whom general contentment prevailed. The farm and garden afford an abundance of useful and interesting work for all the men which is both beneficial to them and profitable to the asylum. The women are all employed in occupations suited to them, and the privacy of the grounds enables them to be much in the open air.

A fire station has been erected on a convenient site between the hospital and main building and contains an adequate supply of fire-extinguishing apparatus. Private telephonic communication has been established between the hospital and the Aberdeen Fire Station. Outside escape staircases have been provided, leading from the upper dormitories in the main asylum. A steam hooter has been placed in a central position. At Daviot a separate store has been built into which all the fire appliances have been collected.

Dr. Reid's administration of the asylum and his treatment of the patients are marked by ability and earnestness.

The registers and books were examined and found correctly kept and written up to date.

Aberdeen City District Asylum.

Aberdeen City District Asylum, *5th and 6th October* 1904.

This asylum was, after its completion, inspected by the General Board on 11th May, 1904, and was by a Minute of that date approved of, and adopted as the District Asylum for the Aberdeen City Lunacy District. It was opened for the reception of patients on 16th May.

On 1st January, 1904, the number of pauper lunatics belonging to the district was 430, 397 of whom were in establishments (asylums and poorhouse wards), and 33 in private dwellings. During the past eight years, 1896-1904, there has been an increase of 111 provided for in establishments, and a decrease of 14 in private dwellings. The average annual increase of those in establishments during these years has been 14. The percentage of patients at present provided for in private dwellings is small, being only 7·6, as against 18·7 for all Scotland.

The following admissions, discharges, and deaths have taken place since the opening of the asylum :—

	Pauper Patients.		
	M.	F.	Totals.
Admitted,	154	160	314
Discharged recovered,	8	4	12
Discharged unrecovered,	3	2	5
Died,	3	3	6

The five discharged unrecovered were transferred to other asylums. The deaths are registered as due to heart disease in 2 cases, and to cancer, phthisis pulmonalis, cerebral thrombosis, and gangrene of the foot, each in 1 case. In every instance a *post mortem* examination was made, and the results are carefully and intelligently recorded in the pathological journal.

Neither restraint nor seclusion has been resorted to in the treatment of any patient. No serious accident has taken place, a fact which, in view of the rough condition of the grounds, is most creditable to Dr. Angus and the staff. A record of minor casualties, such as bruises, cuts, etc., is kept, which ensures attention to their occurrence and inquiry into their causes. There has been no escape in which the patient has been absent for a night.

The asylum is built on the segregate principle, and is the first in Scotland of that type to be completed and occupied. The buildings consist of a central

hospital, five villas for men, five villas for women, an administrative block, with accommodation for attendants on its upper floor, a nurses' home, laundry and power-house, kitchen and stores, recreation hall, workshops, and mortuary. There is a house for the medical superintendent, three lodges for officials, and two double cottages occupied by an attendant, the blacksmith, and farm-servants. All the buildings are of a plain, but substantial character. They stand on an elevated site, 43 acres in extent, sloping to the south-west. The position and internal construction of the several buildings have evidently received careful consideration on the part of the District Board and of their architect, Mr. Marshall Mackenzie.

The hospital section has accommodation for 50 males and 50 females. On each side of a central kitchen are three wards, one for the sick, one for the depressed, and one for recent and acute cases The dayroom on each side is at present used as a dining hall, but as this entails using one of the wards as a passage, it is suggested that the patients dine in their respective wards, and that the dayroom be utilised as accommodation for the senile and infirm. All new cases are admitted to this hospital section, and the arrangements for the reception and examination of the patients on admission are similar to those provided in the most modern asylums. Attached by a corridor on each side is an infectious ward. Until required for their special purpose, it is recommended that these wards be used for the isolation of those who are in the third stage of consumption. Such inmates are foci of infection, and their segregation is necessary for the protection of the other patients.

Of the ten villas, two are closed, that is, kept constantly locked during the day and are occupied by patients who are untrustworthy and require careful supervision. Four are termed colony villas, their doors being unlocked, and they contain patients of the industrious and more easily-managed class. Four villas, two for men and two for women are at present unoccupied. The whole asylum has accommodation for 478 patients.

The various sections have been furnished in a way best fitted to secure the efficient care and treatment of the patients. In the dayrooms sofas and various kinds of easy chairs have been liberally provided, and these will not only afford comfortable seats for patients who are aged and infirm, but will also conduce, generally, to good conduct and contentment. Pleasant and comfortable surroundings have a marked influence in diminishing irritability and restlessness,, and in contributing to the happiness of the patients. It was noticed, with approval, that there was a piano in many of the dayrooms. Pictures, plants, and other objects of decoration have been freely supplied, and the aspect of the wards was throughout one of cheerfulness and brightness. The bookcases are at present empty, but it is understood that a sum for the purchase of books has been granted. The beds are of good design, and are provided with wire and hair mattresses. The bed coverings, which are of good quality and ample for the season, weigh 22 lbs. The equipment of the hospital wards is of a high standard of excellence, and shows a thoughtful and liberal consideration for the care and treatment of the sick and of those suffering from acute mental affections.

The general appearance of the patients in the various sections was highly satisfactory. There was an entire absence of noisy excitement; there were no complaints, and the appeals for discharge were few. The clothing of both sexes was neat in appearance, varied in material, and well fitted. Their health, speaking generally, was good. Fourteen men and 12 women were confined to bed. There has been no case of zymotic disease since the asylum was opened. The dinner seen in one of the villas consisted of broth, bread, and dumpling; it was ample in quantity, and pleasing to the palate. The diet table drawn up by Dr. Angus is a very satisfactory one, and indicates that the patients are being well and suitably fed. The daily rotation of dinners is varied, so that no two weeks are alike. The food is conveyed to the various houses in a specially designed waggon, and it was ascertained during the visit that there was no loss of heat by the time it was served. The industrial employment of the patients receives due attention, 82 men and 60 women being registered as daily engaged in useful work. The chief occupation of the men is outdoor labour. The asylum estate has an area of 346 acres, of which 126 are at present let on lease. The asylum site and farm extend to 177 acres, and afford varied beneficial and remunerative work for the men, 58 of whom are daily employed on the farm, garden, and

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grounds. The percentage of men employed in outdoor work is 41, which is a creditable proportion, and shows that the value of such work in promoting health of body and mind is fully recognised. The garden is five acres in extent, and the supply of vegetables has been adequate. The grounds are still in a very rough condition, but good progress is being made in terracing around the buildings and in making roads and paths.

Dr. Angus is to be congratulated on the manner in which he has organised the staff. In assimilating as completely as possible the nursing arrangements of an asylum to those of a general hospital an important advance in the care and treatment of the insane has been made. The matron and the two assistant matrons are trained hospital nurses and have charge of both male and female divisions of the asylum. One assistant matron is on day duty and the other is night superintendent. The day staff consists of 26 nurses and 8 attendants, the ratio being 1 to 8½ patients, which indicates a staff of adequate numerical strength. For night duty there are 7 nurses and 3 attendants, which gives a proportion of 1 to 29. Ample provision has therefore been made to secure efficient care and supervision of the sick, suicidal, epileptic, and those of defective habits during the night. An interesting feature in the nursing arrangements is the employment of nurses in the male wards. There are 8 nurses on day and 2 on night duty in the male division. Two wards in the male section of the hospital are, both day and night, staffed by nurses—one of the male villas is in charge of 2 nurses, and the staff in another villa consists of an attendant and his wife. An attendant is always available to assist in those wards under the charge of nurses. These arrangements appear to be working most successfully, and to result in gentler methods of dealing with the male patients, better and quieter behaviour, more efficient care, and tastefully kept wards.

The accommodation at the nurses' home, and in the administrative block for the male attendants shows that everything possible has been done to make comfortable provision for the staff, and to induce trustworthy and efficient nurses and attendants to remain in the service of the asylum.

All the buildings are lighted throughout by electricity, and the electric plant is of the best design. The installation of telephonic communication is most complete, and electric bells have been provided in many of the dormitories, by which a nurse or attendant can be summoned. The ventilation of the hospital and villas is by means of electric extract fans. The heating of the various rooms is, in addition to open fires, by hot water radiators. The fittings of the baths are of an excellent kind; the filling of a bath to the depth of nine inches only takes 30 seconds, and the emptying about the same time. Enquiry into the bathing arrangements was made, and they appeared to be satisfactory.

The water supply is abundant and of good dietetic quality. Additional springs have been found during the recent improvements in the grounds, so that there need be no fear as to the water supply being inadequate for prospective requirements. A storage tank, having a capacity of 300,000 gallons, has been built on a site over 100 feet above the floor level of the asylum. The pressure is therefore ample to command all parts of the building. The arrangements for escape in case of fire appear to be sufficient; an alternative exit has been provided from every dormitory flat. Fire alarms have been placed in the wards and throughout the other buildings.

The laundry, kitchen, and stores are spacious, well-lighted, efficiently ventilated, and admirably equipped departments. It is plainly evident that great care has been bestowed upon their arrangements and fittings, and the result is that these departments will compare most favourably with those in any institution in Scotland.

The sewage filtration works have all the latest improvements of the bacterial system, and the effluent, a sample of which was seen, was clear and without any organic deposit.

The asylum as a whole is excellently adapted for its purpose, and the District Board are to be congratulated upon the success which has attended their efforts. The energetic and progressive spirit in which the asylum is managed by Dr. Angus merits recognition.

The official registers were examined and found accurately and neatly kept.

ARGYLL AND BUTE DISTRICT ASYLUM,
22nd and 23rd February 1904.

On the 22nd instant there were 214 men and 231 women, 445 patients in all, on the register of the asylum. Of these, 31 are private patients and 414 paupers. There are 6 men and 3 women absent on statutory probation with the view of testing their fitness for domestic care before being finally discharged from the register. The number resident is 436, all of whom were seen in the course of the visit.

The following changes in the population have taken place since 7th July 1903, the date of previous visit :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted, . . .	3	1	15	20	39
Discharged recovered, .	1	0	5	7	13
Discharged unrecovered, .	1	0	2	4	7
Died, ...	0	1	4	5	10

The result of the changes is an increase of 1 in the number on the register of private patients and of 8 in that of the paupers. Of the 6 pauper patients discharged unrecovered, 2 were sent to the care of relatives, 2 were transferred to other asylums, and 1 was absent by escape for 28 days and consequently his name fell to be removed from the register. For the ten years 1892-1901 the average percentage of pauper patients discharged unrecovered to the care of related or unrelated guardians from all Scottish asylums is 4·3, while from this asylum it is only 2·2. It has, however, been pointed out in previous entries that in Argyll and Bute there are physical difficulties caused by distance and inadequate means of transit which have a deterring influence in preventing trial being made as regards home care of improved or unrecovered patients. The expense of removing to distant homes, and, if the experiment should not succeed, the bringing back of the patient, is often very considerable. This explains the lack of co-operation with Dr. Cameron in this movement on the part of Parish Councils and Inspectors of Poor of distant parishes. From the large number on probation it will, however, be evident that Dr. Cameron is persevering in his efforts to discharge those patients who do not require further care treatment in the asylum.

The deaths are registered as due to acute pulmonary affections in 5 cases, to brain lesions in 2 cases, and to gangrene of the leg, cancer, and consumption, each in 1 case. *Post mortem* examinations were made in 9 cases, or in the satisfactory proportion of 90 per cent. of the deaths. The Pathological Journal and the medical case books are most carefully and intelligently kept by Dr. M'Millan, the assistant medical officer.

There has been since last visit no employment of either restraint or seclusion in the treatment of the patients. One casualty has occurred—a fracture of the neck of the right femur, due to a patient being accidentally pulled down by a fellow-inmate. Minor accidents, such as bruises and cuts, are recorded and the circumstances attending them fully detailed. Two escapes have taken place, one of which was permanent, but there appears to be no cause for anxiety as to the patients' welfare.

The changes among the staff are as follows :—10 attendants and 2 nurses have resigned, there have been no dismissals, and 8 attendants and 4 nurses have been engaged. The day staff gives a ratio of 1 to 9½ patients, which shows that the staff is maintained at adequate strength. For night duty there are 3 attendants and 5 nurses. The attendants' recreation room has been provided with a billiard table, and bookcases for this room are nearly ready. It is hoped that the improved accommodation for the attendants, the new bedrooms and this comfortable recreation room, will tend to lessen the changes among them, which have been undesirably numerous during the past year. Lectures on nursing are given twice a week to the staff, and 6 nurses and 4 attendants have, as a result of this teaching, passed the examination and obtained the certificate of the Medico-Psychological Association. The District Board gives £2 as a prize to those who pass this examination, which should encourage the staff to acquire instruction in their work.

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Argyll and Bute District Asylum.

The management of the asylum continues to be marked by careful and conscientious administration. The condition of the patients as to personal tidiness, suitable clothing, and physical well-being was a satisfactory one. Except in one female dayroom, where there was a considerable amount of noisy excitement and unruly conduct, the patients were quiet and well-behaved. It is suggested that the comfort of the patients in this dayroom be increased by the addition of easy chairs—these are liked by the patients and conduce to their peacefulness and contentment. The employment of the inmates, especially that of the male patients in the various workshops, is well attended to. The number of men engaged in outdoor work is, comparatively speaking, small, and this arises from the limited extent of land in possession of the asylum. It is recommended that a piece of the moorland which adjoins the asylum feu be, if possible, acquired. In trenching and reclaiming it, healthy outdoor work would be provided for the men for many years. Such work has a most beneficial influence on their conduct and health.

The wards were in excellent order, and their clean, bright, and cheerful appearance always attracts favourable notice. The dormitories are suitably furnished, and the bedclothing was adequate for the season. The new Cowal dormitory is an admirable addition to the accommodation. An iron escape staircase of good design has been erected in connection with the high Arran section of the female division. It is satisfactory to be able to report that from every section of the asylum there are now alternative exits in case of fire. The larder and milk house have been tiled and their ventilation made more effective. Good progress is being made with the building of the new joiner's shop, wood store, fire station, and other offices, the work in connection with which is being done by the artizan attendants and patients. An addition is being made to the farm-house.

The desired improvement in the water supply is in process of being effected. The capacity of the reservoir is being doubled from 2,500,000 to 5,000,000 gallons. When completed, all anxiety as to the adequacy of the water supply in times of drought and in case of fire will be at an end.

It was observed that owing to the high price paid for gas an undue economy is being exercised in the lighting of the corridors. Some were in semi-darkness at the time of the visit, which is far from being a safe condition of matters. It is again recommended that the introduction of electric lighting be considered. In 10 of the 15 Scottish District Asylums electric lighting has been installed, and in 2 it is about to be introduced. It has been found in asylums to be an improvement of sanitary and economic value, and its many advantages as to cleanliness, safety, and efficiency are, it is needless to say, now universally acknowledged.

The registers were examined and found regularly and accurately kept.

ARGYLL AND BUTE DISTRICT ASYLUM,
4th and 5th July 1904.

Since the 22nd February of the present year, the date of last visit, the following changes in population have occurred :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
On register 22nd February 1904,	14	17	200	214	445
Admitted,	—	—	9	13	22
Discharged recovered,	—	—	3	2	5
Discharged unrecovered,	1	—	—	1	2
Died,	—	1	2	7	10
On register 4th July 1904,	13	16	204	217	450

With the exception of 3 men and 3 women who were absent on statutory probation and 1 woman who was absent on pass, all the patients were resident and were seen in the course of the visit.

The mortality during the period covered by this report has been low. The causes of death are as follows :—heart disease complicated by secondary affection of the lungs 3 cases, cerebral hæmorrhage 2 cases, pneumonia 2 cases, and phthisis, fibroid disease of the lungs, and chronic bronchitis 1 case

each. One case of sudden death, due to heart failure, was reported to the Procurator-Fiscal, who ordered a *post mortem* examination, the result of which was to show that death was due to natural causes. In all, *post mortem* examinations were made in nine out of the ten cases of death. The notes of these examinations recorded in a special register are fully, accurately, and carefully transcribed.

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There are two entries in the Register of Accidents referring to a fracture of the humerus and a fracture of the neck of the femur, both in female patients. The account given of these casualties points to the conclusion that they were accidental and that they were not followed by serious consequences. The Register of Minor Accidents contains entries referring to bruises and slight marks of injury. The name of the attendant in charge of the patient and the circumstances in which these marks were received are carefully recorded.

Argyll and Bute District Asylum.

One patient escaped since last visit and was absent for at least one night before being brought back.

Excluding head attendants and artisans, there are 21 male attendants and 24 female attendants on day duty, which gives a proportion of 1 attendant to between 9 and 10 patients. The numerical competence of this staff is equal to that of any modern asylum in the country. The night staff of attendants consists of 5 men and 5 women and gives a proportion of 1 night attendant to about 44 patients.

The patients who are under constant supervision during the night are the acute and newly admitted, the sick and infirm, the restless and those of faulty habits. It is understood that the placing of these classes of the insane under supervision during the night has had a marked influence upon the patients themselves and upon the general good order of the asylum.

The Register of Attendants and Servants shows that since last visit 12 men and 5 women have resigned and 12 men and 4 women have been engaged. The changes among the male attendants have been numerous. It was observed with approval that the billiard and recreation room for male attendants has been completed and is now in use, and that a series of six bedrooms for male attendants in the same wing are occupied. It is hoped that these provisions may have the effect of inducing suitable young men to remain longer in the service. It is, however, probable that the distance of the asylum from a large centre of population is a disadvantage in this respect, and that ultimately the only way to overcome the difficulty will be the engagement of a larger proportion of married male attendants and the employment of female attendants for the nursing of the sick and infirm male patients.

Twenty-six patients, 6 men and 20 women, were confined to bed in the sick-rooms chiefly on account of physical ailments. The general health of the majority of the inmates was good, and 336 out o 443 of the resident population were usefully employed at the time of the visit. Ninety-one patients, including 8 women, were working in the garden and grounds; 35 women were employed in the laundry and kitchen; 48 women were sewing or knitting; and 40 men were engaged in artisan work, chiefly in connection with the erection of a new block of workshops.

That a commendable amount of freedom is accorded to the patients is shown by the fact that 90 men and 16 women are allowed unrestricted parole within the asylum grounds. With the exception of two or three female patients, who were apparently excited by the visit, the inmates were quiet and orderly in their demeanour, and few of them volunteered any statement or submitted complaints.

The asylum was found scrupulously clean in every department. The dayrooms were bright, cheerful, and comfortably furnished. Everything that was seen in the course of the visit indicated that the care of the patients is adequately and conscientiously undertaken by Dr. Cameron and his staff.

It is recorded with satisfaction that the work of enlarging the water reservoir has been completed. The supply now at the disposal of the institution is believed to be ample for all requirements, and the freedom of the water from impurities continues to be secured by the use of the efficient filtering process in use.

The case-books as at present kept contain admirable accounts of the progress of each patient under care.

The registers were examined and found correct.

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Ayr District Asylum.

AYR DISTRICT ASYLUM,
19*th and* 20*th February* 1904.

There were 519 patients—249 men and 270 women—on the register of the asylum on the 19th instant. They were all resident and seen, except 1 women who was absent on statutory probation.

The following changes have taken place in the population of the asylum since 22nd July 1903, one of the dates of the previous visit :—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
Admitted, ...	33	50	83
Discharged recovered, .	13	15	28
Discharged unrecovered, .	8	12	20
Died, ...	20	23	43

There has been a decrease of 8 in the number of male patients during the period to which the foregoing figures refer. The number of females is the same as at last visit.

Of the 20 patients discharged improved or unrecovered, 11 were sent to the care of relatives, 5 were transferred to other establishments, and 4 were sent to England and Ireland. From the large number sent to home care, it will be seen that Dr. Easterbrook is discharging those patients who do not require further asylum care and treatment. A continuance of this policy will prevent undue accumulation. The percentage of the discharged improved or unrecovered during the last ten years from this asylum is 3·9, of whom 2·7 per cent. were removed from the poor roll, and only 1 per cent. are still maintained by their respective parishes. The average percentage discharged unrecovered during the same period from all Scottish asylums is 4·3, but from some establishments it is as high as 10·1, 8·5, and 7·3.

The mortality has been greater than usual, and the severity of the conditlon of the cases admitted is shown by the fact that 35 per cent. of the deaths was of patients admitted during the last twelve months. The deaths are registered as due to heart disease in 10 cases, to gross brain lesions in 9 cases, to general paralysis of the insane in 6 cases, to pneumonia in 4 cases, to consumption in 3 cases, to exhaustion from acute mental affections in 2 cases, to facial erysipelas in 2 cases, and to osteomyelitis, hepatic cirrhosis, senile decay, acute hydrocephalus, enteritis, peritonitis, and septicæmia each in 1 case. In 32 instances, or in 74 per cent. of the deaths, the cause was verified by *post mortem* examination. The manner in which the pathological journal and the medical case books are kept reflects great credit on Dr. Easterbrook and his assistant staff.

The Register of Restraint and Seclusion contains 1 entry, referring to the use of seclusion for a short period in a case of dangerous excitement. One casualty has occurred, a burn on scalp and neck, the patient turning on the hot water when his head was beneath the tap. The handles have been removed from all the hot water taps and keys substituted, which are kept by the attendants. There has been no escape.

It is satisfactory to be able to state that the changes in the staff are decreasing in number. The wages, hours of duty, and leave of absence of the attendants and nurses have been revised, and the new conditions of service appear to be liberal and satisfactory on all points. A sitting-room has been comfortably furnished for the nurses, and a similar provision has been made for the attendants. It is hoped that the improvements in the accommodation and comforts, in the dietary, and in the terms of service will be instrumental in securing and retaining an intelligent and capable staff. There are 23 attendants and 24 nurses for day duty, which gives a proportion of 1 to every 11 patients. There are also 6 attendants and 6 nurses for night duty. The arrangements for night nursing and supervision are very satisfactory, a large proportion of the patients being under continuous night observation. The changes in the staff since last visit are as follows :—4 attendants and 4 nurses have resigned, 3 attendants have been dismissed, and 7 attendants and 4 nurses have been engaged. The dismissals were not for misconduct affecting the patients.

Lectures on nursing are regularly given to the whole staff by Dr. Easterbrook, which cannot fail to increase its efficiency.

It is understood that the District Board have under consideration contracts for the construction of a railway siding from the main line to the asylum boiler house. As the material for the building of the new hospital is to be conveyed by this side line, it is urged, in view of the greatly overcrowded condition of the wards, that the construction of the line be pushed on with all possible dispatch.

There was great tranquillity and contentment among the patients during the visit. With the exception of a male patient, all were quiet and well behaved, and the general condition of the patients was highly satisfactory. Their clothing was neat in appearance and ample for the season, and their personal tidiness is evidently well attended to. The dinners were substantial and of good quality. The service of the meals was most orderly, a better arrangement of the tables and the substitution of chairs for benches adding greatly to the facilities in serving the food. The industrial features of the administration deserve commendation—159, or 63 per cent. of the men, and 188, or 62 per cent. of the women are daily engaged in useful work.

New garden ground will be required in place of the large portion of the present garden which will be absorbed by the railway siding, and the making of the new garden will give additional outdoor work for the male patients and in all probability increase the number employed outside.

The amusements and recreations of the patients are well organised and liberally provided. Newspapers and magazines are regularly circulated through the wards. A football match was played at the time of the visit between a team from Ayr and a team consisting of patients, Dr. Simpson, and some members of the staff.

The infirm and acute wards are overcrowded to a dangerous extent, and relief to this most unsatisfactory state of matters cannot be provided a moment too soon. Specifications for the building of the new hospital, are, it is understood, being prepared, and it is earnestly hoped that this extension will be commenced without undue delay. There are 15 men and 21 women confined to bed, and, except for overcrowding, their care and treatment is all that can be desired. It was abundantly evident that great medical interest is taken in the patients, and that everything is done to ameliorate their condition, and to promote the recovery of the curable.

The dayrooms and dormitories were in excellent order. A painter attendant has been added to the staff, and with the assistance of a patient good work is being done in improving the appearance of the wards. The stores have been extended to meet present requirements The male villa is about to be provided with a larger water supply for its fire hydrants. It is learned with approval that the District Board have decided to light the asylum with electricity. It will undoubtedly be an improvement of sanitary and economic value.

The fire extinguishing appliances have been largely increased, the main building has been divided into three sections by means of six fireproof doors, and six outside staircases of good design are in course of erection. Fire buckets to the number of 144 have been placed in convenient positions throughout the asylum and villas. An experimental alarm of fire was given, and the brigade was on the spot and at work with commendable promptness. The pressure was sufficient to throw two jets of water to the highest point of the main building. The present method of giving an alarm of fire is not satisfactory, but a steam hooter is about to be substituted.

The careful and thorough manner in which Dr. Easterbrook discharges his duties merits the warmest recognition.

The official registers were examined and found regularly and correctly kept.

AYR DISTRICT ASYLUM,
11th and 12th July 1904.

The asylum was last visited on the 19th February of the present year. Since then the following changes in population have occurred :—

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Ayr District Asylum.

	Pauper Patients.		
	M.	F.	TOTALS.
On register 19th February 1904, - -	249	270	519
Admitted, - - - - - -	31	29	60
Discharged recovered, - - - -	9	4	13
Discharged unrecovered, - - -	4	6	10
Died, - - - - - - -	10	14	24
On register 11th July 1904, - - -	257	275	532

Three women were absent on statutory probation, and 1 man and 1 woman were absent on pass. With these exceptions, all the patients were resident and were seen during the visit.

The causes of death are registered as follows:—6 persons died of heart disease; 3 of phthisis; 3 of bronchitis; 2 of exhaustion from acute mental disease; 2 of general paralysis; 2 of cerebral hæmorrhage; and 1 person died of each of the following diseases, namely, erysipelas, cancer of the uterus, senile decay, pneumonia, epilepsy, and a wound in the throat self-inflicted prior to admission. *Post mortem* examinations were made in 21 instances, or in all except three where permission was refused. The facts ascertained at these examinations are carefully recorded in a special book, as well as in the case-books.

The Register of Accidents contains two entries, referring to a fracture of the humerus in a female patient and a Colles' fracture in a male patient. Both were the result of accidental falls.

The Register of Minor Accidents contains a description of all marks and bruises sustained by patients, with an account of the manner of their occurrence and the name of the attendants who were in charge at the time.

There are no entries in the Register of Restraint and Seclusion, or in the Register of Escapes.

The changes among the attendants and nurses are as follows:—7 men and 7 women have resigned, 1 man was dismissed for misconduct, and 8 men and 6 women were engaged. The staff of ordinary attendants consists of 25 men and 24 women for day duty—a proportion of 1 to 10½ patients, and 6 men and 6 women on night duty—a proportion of 1 to 44 patients. The female day staff of 24 nurses to 271 resident patients is somewhat below the proportion generally recognised as necessary in modern asylums.

Twenty-eight patients—11 men and 17 women—were confined to bed, several of them on account of mental ailments, for which rest in bed is now regarded as an essential element in treatment. Apart from those patients who were in bed on account of physical ailments, it was evident that the standard of health throughout the inmates of the asylum was good. The patients bore evidence of being suitably fed and of being much in the open air. At the time of the visit the weather was fine, and all the patients who were not necessarily confined to the house were outside. A large number of the women who were sitting on the terrace were sewing or knitting, and 85 of the men were working in the grounds. In all, 166 men and 186 women were industrially employed. The dinner on the first day of the visit was an excellent and liberal meal, consisting of soup, boiled meat, and potatoes, and no objection could be taken to it even by the few inmates who are inclined to be discontented.

The female patients were remarkably quiet and sedate in their behaviour, and the same may be said of the male patients, with the exception of one or two individuals who are in the habit of expressing their grievances in too forcible a manner. The dress of both sexes was neat and in good repair.

The new railway siding from the Glasgow & South-Western Railway to the asylum has been begun, but the work is proceeding very slowly. This is the more regrettable as the construction of the new hospital depends upon the completion of this branch line, and as at this date there are only 6 vacant beds in the asylum—one on the male and five on the female side. In connection with the railway siding it was learned that the District Board have acquired by purchase a field of ten acres situated between the railway and the asylum estate.

It is understood that estimates have been received for the work of building the new hospital, and that contractors will be immediately selected.

A commencement has been made with the work of wiring the institution prior to the installation of electric lighting.

Alternative exits and iron escape staircases have been provided in every part of the buildings where they were required. A steam hooter and a system of electric bells are to be introduced for the purpose of giving an alarm in case of fire and of indicating the position of the fire. The fire brigade has been organised, and is regularly drilled. Among minor structural alterations the following have to be noted:—The mess-room for nurses has been enlarged, and that for male attendants is about to be enlarged. Ward 3 B on the female side is being enlarged by the removal of two single rooms, and the corresponding ward on the male side is to be enlarged in a similar manner. The work of enlarging these apartments is being done by the asylum tradesmen, assisted by patients.

It is recorded with approval that the District Board have appointed an Assistant Steward and an Assistant Matron. These officials are much needed in an institution of this size, not only for the reason that the departments in question have hitherto been understaffed, but also for the better supervision and management of the asylum.

The asylum was found in good order, and the various apartments were clean and well aired.

Dr. Easterbrook was absent on holiday at the time of the visit, and his place was being taken by Dr. Simpson, the Senior Assistant Medical Officer, who is thoroughly conversant with his duties, and was able to supply all necessary information.

The books and registers were examined and found correct.

BANFF DISTRICT ASYLUM,
21*st March* 1904.

There are 178 patients on the register of the asylum at this date. Since 11th July 1903, when the asylum was last visited, the following changes in population have taken place :—

	PRIVATE AND PAUPER PATIENTS.		
	M.	F.	TOTALS.
On Register 11th July 1903,	88	87	175
Admitted since,	17	9	26
Discharged recovered,	4	5	9
Discharged unrecovered,	3	4	7
Died,	3	4	7
On Register at this date,	95	83	178

Of the patients at present on the register, 3 men and 1 woman are paid for out of private funds. All the patients were resident and were seen in the course of the visit.

The deaths are registered as due to pneumonia and pleurisy in 3 cases, to general paralysis in 2 cases, and to heart disease and senile decay in 1 case each. *Post mortem* examinations were made in each instance, a fact which is highly creditable to the Medical Officer.

The only entry in the Register of Accidents refers to the fracture of the femur in an old female patient caused by slipping and falling on a floor.

In January of the present year an outbreak of smallpox occurred in the asylum concurrently with an epidemic in the division of the county in which the asylum is situated. There were in all five cases, limited to the male side of the asylum, and including two male attendants and three male patients. The epidemic was promptly and vigorously dealt with from the outset both by the county and the asylum authorities. All the officials and patients were vaccinated : the actual cases of the disease were isolated in the small detached infectious hospital in the asylum grounds, and contact and suspected cases were isolated in one of the wings of the main asylum building. The cases in the hospital were placed under the charge of Dr. Macpherson, Banff, and two nurses and a resident Medical Officer were engaged to supervise the contact and suspected cases. The most vigorous precautions were imposed with the object of rendering isolation as effective as possible. The disinfecting of clothing, bedding, and other articles through which infection might be conveyed was greatly facilitated by means of the new steam disinfector recently fitted up at the asylum by the District Board. At this date there is only one patient in hospital, who, though recovered, is being detained for a

Appendix B.

Commissioners' Entries.

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Banff District Asylum.

few days as a matter of precaution. The cases were fortunately of a mild type and they all recovered satisfactorily. Much credit is due to Mr. Fowler and Dr. Fergusson, who throughout an anxious and critical time did all that was possible to secure the safety of the patients at great personal risk and inconvenience to themselves.

The unfortunate occurrence to which reference has been made necessarily interfered with the ordinary work of the asylum and delayed many of the operations which had previously been in progress. During the epidemic the want of telephonic communication between the various divisions of the asylum was especially felt, and it is again suggested to the District Board that it would greatly facilitate administration to connect the two villas and the hospital with the main building in this way. There can also be no question as to the convenience of having telephonic communication between the asylum and the town of Banff, but that is a matter which scarcely comes within the scope of this report.

The asylum was found in good order. The new villa especially was clean and comfortable. The appearance of the wards and dormitories of this villa has been greatly added to by the hanging up of a large number of handsome pictures generously presented by the Countess of Seafield. The terracing and laying out of the grounds surrounding the villa have been completed and a number of trees and shrubs have been planted.

The dormitories in the main building have been thoroughly cleaned and repainted and the floors have been stained and varnished. The heating of these rooms has markedly increased their comfort.

The patients were found in good health, and their dietary and personal clothing were in every respect satisfactory.

The books and registers were examined and found correct.

BANFF DISTRICT ASYLUM,
23*rd June* 1904.

There are on the register of the asylum the names of 182 patients. Of these, 4 men and 1 woman are private patients, and 91 men and 86 women are paupers. No one was absent on pass or probation.

Since last visit, on 21st March 1904, the following changes in the population have taken place :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Admitted, . . .	2	0	4	4	10
Discharged recovered, .	1	0	4	0	5
Discharged unrecovered,	0	0	1	0	1

There has been no death. It is, however, very disappointing to have to record that on the day of the visit the illness of a female patient was found to be due to typhoid fever. The last case of this disease was on 21st March 1903, and it was confidently hoped that after all that had been done by the District Board to put the asylum into a thoroughly sanitary condition no further recurrence of the fever would take place. It is difficult to indicate where the typhoid poison can be lurking, as the many sanitary improvements that have been effected ought to have secured the prompt removal of all *excreta*, so that neither air nor water could be contaminated. This new case, coupled with several cases of intestinal infection which have recently occurred in the asylum, however, points to a continuance of some sanitary defect. The most common vehicle of the typhoid poison is drinking water, and in view of this recurrence it is recommended that the water from all the taps be examined from time to time by bacteriological experts. It is understood that the water has been examined and pronounced pure, but it is possible that at times it may become contaminated. The soil might also be examined bacteriologically, especially at the source of the water supply. It is clear that fresh efforts are necessary to ascertain the source of this renewed outbreak.

A new milk-house has been erected, one section of which has been equipped with an appliance for cleansing by steam milk cans and other dairy utensils. This provision should prove effective in securing purity of the milk supply. The other section of the dairy—the milk store—was all that could be desired

as to scrupulous cleanliness. The supply of milk last week amounted to 128 gallons of unskimmed, and 58 gallons of skimmed. It is freely given as extra diet to feeble patients and as a beverage to working inmates. The importance of an abundant milk supply in the dietary cannot be overestimated. The dinner at this date consisted of milk, broth, and bread and cheese, and was evidently a popular meal. Appendix B. Commissioners' Entries. Royal and District Asylums.

All sections of the asylum were in excellent order. The whole of the interior of Woodpark has been repainted and revarnished, and the separate hospital and the female workroom have been similarly renovated. A well designed outside iron staircase has been erected as an alternative exit in connection with the dormitories of Woodpark. It is again recommended that the floor of the main male dayroom, which is worn out, be relaid with pitch pine. The walls of the new male villa are now adorned with a large number of pictures gifted to the asylum by the Countess of Seafield. Such interesting additions to the environments of the patients have a beneficial effect in many ways. Experience has proved how well adapted this villa is for the purposes for which it was built. It was observed that there were no fire-buckets in this house. As these are most effective in the first moments of fire, it is recommended that they be supplied for both the ground and upper floors. Banff District Asylum.

It is understood that a contract has been accepted for the construction of telephonic communication between the main building and the outlying sections. It will undoubtedly greatly add to the facilities of administration, and its extension to the residence of the Medical Officer would prove of great service.

The condition of the patients as regards personal neatness and tidiness of clothing was most satisfactory. With one exception they were quiet and orderly in behaviour and were free from complaints, except those which were the outcome of delusions. Neither restraint nor seclusion has been resorted to in their treatment since last visit. There has been no accident and no escape.

The proportion of patients who are engaged in industrial occupation continues to be large. As regards the percentage of male inmates employed in agricultural work, this institution stands second highest among Scottish asylums. The large farm in connection with the asylum fully justifies its existence by affording healthy outdoor employment to such a large percentage (40) of the men. This work has an important influence on their well-being and contentment, and the attention given to it indicates successful management and merits commendation.

There has been only one change in the staff since last visit. A record of service shows that 4 have been employed in the asylum over three years, 3 over two years, 3 over one year, and 8 under one year. The average duration of service among the artisan and farm staff is most satisfactory, being over four years.

The registers were examined and found written up to date.

Crichton Royal Institution, Dumfries, 15*th*, 16*th*, 17*th*, *and* 18*th February* 1904.

Crichton Royal Institution, Dumfries.

On the 15th instant there were 773 patients on the registers of the institution. Their position is shown in detail in the following statement :—

	M.	F.	TOTALS.
I. Certificated Patients :—			
(1) Private, ...	218	229	447
(2) Pauper, ...	146	167	313
II. Voluntary Inmates, ...	9	4	13
	373	400	773

Effect has been given in the above figures to the transference since last visit of 2 females from the pauper to the private list.

There are 5 male and 2 female private patients absent on statutory probation. The number resident is 766, all of whom were seen and afforded an opportunity of making any statement they desired.

The following changes in the population have taken place since 28th July 1903 :—

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Commissioners' Entries.

Royal and District Asylums.

Crichton Royal Institution, Dumfries.

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
I. Certificated Patients :—					
Admitted, ...	36	25	16	19	96
Discharged recovered, . .	15	19	9	6	49
Discharged unrecovered, . .	7	10	3	3	23
Died, ...	6	6	7	10	29
II. Voluntary Inmates :—					
Admitted, ...	7	3	—	—	10
Left, ...	4	2	—	—	6
Died, ...	1	—	—	—	1

During the period embraced in the above figures, there has been an increase of 3 in the number of voluntary inmates, no change in that of the private patients, and a decrease of 5 in that of the paupers. The recovery rate, which is 51 per cent. on the admissions, is a high and satisfactory one.

The 29 deaths are all due to natural causes, and in 16 instances, or in 55 per cent. of the cases, the causes were verified by *post mortem* examination, Brain lesions were accountable for 6, pneumonia for 7, cardiac disease for 4, phthisis pulmonalis also for 4, general paralysis for 3, chronic Bright's disease for 2, and cancer, senile decay, and maniacal exhaustion each for 1.

The Register of Restraint and Seclusion contains 5 entries. They refer to the use of both restraint and seclusion in 1 case, and to the seclusion of 2 patients. Two accidents are recorded :—(1) A Colles fracture due to an accidental fall, and (2) a fracture of left humerus sustained during a struggle with an attendant. An enquiry into the circumstances attending the latter casualty was made by the Procurator-Fiscal, who decided there were no grounds for further action. A record is kept of minor accidents, such as bruises and cuts, which insures that the causes which occasioned them are investigated. Four escapes have occurred in which the patients were absent at least one night before they were brought back.

The changes in the staff consist of the resignations of 7 attendants and 14 nurses, the dismissal of 3 attendants and 1 nurse, and the engagement of 9 attendants and 26 nurses. Eleven additional nurses have been engaged in order to staff the Sanatorium and the new hospital blocks. The changes among the nurses in the First House are more numerous than is desirable. The teaching of the staff by means of systematic lectures and practical demonstrations receives due attention, and as a result of this tuition 5 attendants and 11 nurses have passed the examination and obtained the certificate of the Medico-Psychological Association for proficiency in nursing. It is scarcely necessary to point out that the welfare and happiness of the patients depend largely on the humanity, skill, and efficiency of those with whom they are in constant association. It is learned with satisfaction that 6 additional cottages have recently been built, 1 has been purchased, and that another is about to be built. There are at present 13 married attendants who are provided with suitable house accommodation, and there are 4 vacant cottages for those who prove themselves worthy of such houses. There can be no doubt that the provision of cottages is one of the best and surest ways of securing and retaining the services of capable and trustworthy male attendants.

The two new buildings forming the hospital section of the new pauper asylum are completed, and are admirable additions to the resources of the institution. Each contains a hospital ward of 20 beds, which in its design and arrangements is not surpassed by any similar provision for recent and sick cases in any other Scottish asylum. The accessory apartments, such as the lavatory and bathroom, are equipped w th arangements of modern design. On the ground floor are, besides this hospital ward, a dayroom and a dining hall which are excellently furnished, and their appearance is one of comfort and brightness. Among the special features of these hospital buildings that deserve notice are the arrangements for the admission of patients. There is an apartment near the entrance door furnished as a medical consulting-room, where each patient on arrival is received by a Medical Officer, and where notes can be taken of such information as can be obtained from those who accompany the patients, as to the history of the case. Adjoining the consulting-room is a bathroom, where, if the nature of the case admits, the

patient is bathed, and after the bath the patient is put to bed in an adjoining bedroom, where an examination is made by the Medical Officer as to physical condition, the existence of injuries, bruises, &c. This bedroom adjoins the hospital ward, into which the patient may be transferred, if so ordered by the Medical Officer. Such a procedure is best calculated to favourably impress the patients from the first that they will be kindly and skilfully treated, and it avoids everything that might create distrust and disquietude, as is apt to be the case when a patient is taken through several corridors and dayrooms, with the unlocking and locking of doors, before the sickroom is reached. On the upper floor are two dormitories, and accommodation for the medical assistants and the staff. The female hospital at present contains 15 patients, and as it will take a considerable time to fill these hospitals with recent and acute mental cases (the admission rate of paupers being a small one) it is strongly recommended that the patients in the sick wards of the Second House be removed to these buildings. The arrangements in these wards, especially on the male side, are far behind in regard to modern requirements, and the female ward is overcrowded. Improvements in the accommodation and nursing of the sick in the Second House have been long desired, and until the proposed new pauper infirmaries are provided, which will take several years to do, it appears most desirable in the interests of the patients to utilise the new hospitals for the treatment and nursing of all the sick paupers of the Second House.

The Sanatorium contains 10 female patients. The impressions left of the visit to this building were of a pleasing character. It serves two most important objects—it affords a means of isolating those who are the subjects of an infective disease, and who are therefore a source of danger to their fellow-inmates, and it gives every facility for the best method of treatment at present known to medical science for the cure of consumption.

The extension and improvement of Maidenbower House are completed, and it now affords comfortable accommodation for 16 patients and their staff. The homely and healthy surroundings which the inmates enjoy in this house cannot fail to increase their contentment and physical well-being.

The various sections of the institution, now 15 in number, were found in good order, and the conspicuous ability which marks Dr. Rutherford's adminstration was never more evident than at the present visit. The general condition of the patients was highly satisfactory, no complaints of a reasonable character were made, and the appeals for discharge were comparatively few. There was, on the whole, an absence of noisy excitement and irritability, and the general health of the asylum is good, only 14 men and 15 women being confined to bed. The dinners seen during the visit were abundant and popular meals; all enquiries regarding the dietary elicited favourable replies. A large and satisfactory proportion of the male pauper patients, and of private patients at the lower rates of board, are employed at outdoor work on the farm and garden, which is beneficial to them both bodily and mentally. Twenty-four patients are granted parole beyond, and 79 within the grounds. The liberality in the treatment of the patients merits commendation. The number who attended Divine service last Sunday was 150 men and 135 women, or 285 in all.

The chief improvement now in progress is the building of a large dining-hall and accommodation for nurses over the kitchen of the First House. A handsome open-looking fence is being erected to the west of the main gateway.

The contributions from the Crichton Charitable Fund now amount to nearly £1700. The benefits which this fund confers on the Dumfries Lunacy District are many and far-reaching. On account of the generous assistance given from this fund to the insane in poor circumstances, the pauper lunacy of the Dumfries district is only slightly increasing in comparison with what is going on in every district in Scotland. The proportion of pauper admissions from the Dumfries district to 100,000 of population is 45, whereas for all Scotland it is 67. The smallness of the Dumfries proportion is only equalled by that of the districts of Orkney, Shetland, and Caithness. There cannot be a doubt that, were the help from the Charitable Fund withdrawn, there would be a large and unfortunate increase of pauper lunacy chargeable to the parishes of the counties of Dumfries, Kirkcudbright, and Wigtown.

The official registers were examined, and found neatly and accurately kept.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Crichton Royal Institution, Dumfries.

CRICHTON ROYAL INSTITUTION, DUMFRIES,
6th, 7th, and 8th July 1904.

Since the institution was last visited the following changes in population have occurred :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
1. Certificated Patients—					
On register 15th Feb. 1904,	218	228	146	168	760
Admitted, ...	18	18	9	14	59
Discharged recovered, .	10	5	2	7	24
Discharged unrecovered, .	2	1	3	—	6
Died, ...	6	2	3	4	15
On register 6th July 1904, .	218	238	147	171	774
2. Voluntary Inmates—					
Resident 15th Feb. 1904, .	9	4	—	—	13
Admitted, ...	6	1	—	—	7
Left, ...	4	2	—	—	6
Died, ...	1		—	—	1
Resident 6th July 1904, .	10	3	—	—	13

In the above figures effect has been given to the transference of one certificated female patient from the private to the pauper list.

There are in all 787 patients on the register of the institution at this date. With the exception of 3 male and 7 female patients who were absent on pass, all the others were resident, and were seen in the course of the visit.

The number of deaths which have occurred in the interval covered by this report is 16, which is a low rate of mortality. The causes are registered as follows :—Heart disease 4 cases, diseases of the lung (including a case of phthisis, a case of pneumonia, and a case of pleurisy) 3 cases, senile decay 3 cases, gross disease of the brain 2 cases, and general paralysis, colitis (non-specific) peritonitis, and cancer of the stomach 1 case each. *Post mortem* examinations were made in nine instances.

There are remarkably few casualties to record. The Accident Register contains only one entry, referring to the fracture of a finger, and the book in which minor accidents are recorded contains only three entries.

The changes among attendants and nurses have been as follows :—Five men and 7 women have resigned, 4 men and 1 woman have been dismissed, and 9 men and 9 women have been engaged. Two attendants were dismissed for roughness in dealing with patients, 2 for unsuitability, and 1 for misconduct. The ordinary staff of nurses and attendants numbers 104 persons, and the changes referred to are therefore not only not more numerous than might be expected, but by comparison few.

The Register of Restraint and Seclusion contains two entries, which refer to the seclusion on two occasions of 1 male patient.

Since last visit there have been two escapes, and the patients were in each instance absent for at least one night before being brought back.

Two hundred and sixty patients—129 men and 131 women—attended Divine service in the Crichton Memorial Church last Sunday.

The extension of the institution, either by acquiring houses in the neighbourhood and adapting them for occupation by patients or by erecting new villas, continues to make progress. In the year 1900, apart from the First and Second Houses, which constitute the Main Asylum, there were eight separate or detached buildings inhabited by 145 patients, or about 20 per cent. of the whole population. This year there are thirteen detached buildings, containing in all 291 patients, or about 40 per cent. of the population of the asylum.

The general advantages of breaking up the inmates of an asylum into small groups are too well known to require restatement here, but it may be pointed out that under Dr. Rutherford's method of administration the separate houses are under the charge of guardians, who are directly responsible to the medical officers for the management of the houses and the care of the patients. In this way an individuality which could scarcely be exceeded within a lunatic asylum is established in connection with each dwelling.

The following brief description of two of these houses will be sufficient to show the form of the provision they afford for the care of patients :—

Hannahfield House is used for the accommodation of gentlemen of the private class. There are in it at present 13 gentlemen, several of whom are old and frail. The establishment is under the charge of a lady guardian, who is assisted by an old and faithful male attendant. In addition to two servants, two female pauper patients live in the house and assist in the domestic work. The house, which is commodious, is surrounded by extensive grounds, within which the patients can walk about at will.

Brownhall is an old farm house which contains 12 female patients, mostly of the pauper class. The house is under the charge of a married woman, the wife of one of the attendants. She was formerly an attendant in the asylum. The patients were seen at dinner, an excellently cooked meal of three courses. They do their own household work under the direction of their guardian. The bedrooms were scrupulously clean and nicely furnished. The patients looked healthy and cheerful, and the door of the house, which opens upon a small garden, stands open all day.

The guardians draw provisions directly from the central stores of the institution, and all cooking is done within the kitchen attached to the houses.

The new male and female Hospital Villas for pauper patients are now occupied. There are 21 patients in the male hospital, which is under the charge of a lady superintendent. The sick ward is entirely staffed by female nurses. The female hospital is occupied by 31 patients. It is under the charge of a lady—one of the assistant medical officers—who also acts a matron of this hospital. The provision in these hospitals for sick, infirm, and newly-admitted patients, which was described at length in the preceding entry, is in all respects commendable. There are 19 patients—10 men and 9 women—in the new Sanatorium for Consumption. This building is entirely under the charge of female nurses. It occupies a commanding and sheltered situation, and is constructed on the most approved principles with a view to the treatment of tuberculosis.

The farm house of Maidenbower, the latest acquisition by the institution, has been renovated and enlarged, and is now occupied by 15 female patients, chiefly of the pauper class. Like all the other villas for patients, it is lighted by electricity, and is connected by telephone with the central institution.

The First House contains 117 gentlemen and 54 ladies. It was found, as usual, comfortably furnished and in good order. The low north gallery for gentlemen is about to be reconstructed and redecorated, and is to be fitted with entirely new sanitary appliances and bathing accommodation. The new dining-room is approaching completion. It is a spacious, well-lighted apartment, which will be capable of seating about 100 persons.

There are 307 patients—143 males and 164 females—in the Second House. This is a material reduction in the numbers resident in recent years, and is due entirely to the extension of the villa system, to which reference has been made. There was, however, no appearance of there being too few patients in the building. On the contrary, the only noticeable change was in the sickrooms, which have been markedly relieved by the opening of the new hospitals. Indeed there seems no reason why these hospitals should not be further utilised for the reception of sick and infirm cases from the Second House.

The condition of the patients, as a whole, at the time of the visit was entirely satisfactory. There was a general absence of noisy excitement, and although there were the usual number of protests made by those inmates who consider themselves unjustly detained, there was no prevalence of irritability or discontentment.

Dr. Rutherford was absent on holiday, necessitated by an attack of illness, and the asylum was under the charge of Dr. Law, the Senior Medical Officer, who efficiently discharged the onerous duties of his responsible position.

The books and registers were examined and found correct.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Dundee Royal Asylum.

DUNDEE ROYAL ASYLUM,
18*th March* 1904.

The following changes have occurred in the population since last visit :—

	PRIVATE PATIENTS.		
	M.	F.	TOTALS.
On Register 12th September 1903, . .	15	19	34
Admitted since, ...	1	3	4
Discharged recovered, . . .	—	1	1
Discharged unrecovered, . . .	—	1	1
On Register at this date, . . .	16	20	36

Two ladies included in the above figures are voluntary inmates. All the patients were resident and were seen in the course of the visit.

The patients continue to occupy Gowrie House, which formed part of the old Royal Asylum prior to its purchase by the Dundee District Lunacy Board.

The accommodation is in all respects excellent, and the patients were found satisfactorily provided for.

Since the asylum was last visited Dr. Rorie has retired from the post of Medical Superintendent, and Dr. Tuach, the senior Assistant Medical Officer, has been promoted to fill the vacancy. Dr. Rorie's service of over 40 years deserves acknowledgment were it only for its exceptionally long duration, but it can only be fully appreciated by those who understand the anxious and arduous nature of the duties which from day to day are imposed upon the Superintendent of a large asylum for the insane.

The books and registers were examined and found correct.

DUNDEE ROYAL ASYLUM,
9*th and* 10*th August* 1904.

There were on the 10th instant 71 patients on the register of the asylum. Of these, 2 ladies are voluntary boarders, and 69 are certificated patients.

The following changes have taken place since last visit :—

	PRIVATE PATIENTS.		
	M.	F.	TOTALS.
Admitted, ...	15	23	38
Discharged recovered, ...	0	2	2
Discharged unrecovered, . . .	0	1	1

Thirty-five of the patients admitted were transferred from the District Asylum. The whole of the patients for whose care and treatment the Directors of the Royal Asylum are responsible are now resident in this establishment.

The patients were found presenting every indication of being well-cared for and kindly and judiciously treated, and in general they were contented. Their behaviour was orderly ; the day being fine, all with a few exceptions were out in the grounds, which are very pleasant and afford good opportunities for exercise. In the matter of dress and personal neatness, the condition of the patients was satisfactory.

The establishment was in excellent order, and is most tastefully furnished and decorated. The surroundings of the patients are very comfortable, and in regard to the inmates at the lower rates of board, the superiority of the accommodation confers many benefits and advantages.

The day staff consists of 4 attendants and 6 nurses, and for night duty there is 1 attendant and 1 nurse.

There are no entries in the Register of Restraint and Seclusion. One casualty has occurred—a male patient broke a pane in a window, got out and fell to the ground, but except for a few bruises he escaped injury. The panes in the dormitory windows are of large size and they should be guarded in a safe but unobtrusive manner.

The registers were not written up to date.

DUNDEE DISTRICT ASYLUM,
18*th March* 1904.

The following changes in population have occurred since the asylum was last visited :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On Register 17th September 1903,	16	19	160	234	429
Admitted since, ...	1	2	26	32	61
Discharged recovered, . .	—	—	12	14	26
Discharged unrecovered, . .	1	3	3	19	26
Died, ...	1	—	11	12	24
On Register 18th March 1904, .	15	18	160	221	414

With the exception of 1 man who was absent on statutory probation and 2 men and 1 women who were absent on pass, all the patients were resident and were seen in the course of the visit.

The causes of death as reported in the Register of Deaths may be classified as follows :—5 cases died from general paralysis, 4 from senile decay or debility, 3 from disease of the heart, 3 from gross disease of the brain, 2 from enteritis with diarrhœa, and 1 patient from each of the following diseases, namely—phthisis, bronchitis, pneumonia, epilepsy, septicæmia, and cancer. One male patient died as the result of injuries to the chest involving numerous fractures of the ribs. The circumstances attending the cause of this patient's death formed the subject of exhaustive enquiries by the District Board, the Procurator-Fiscal, and the General Board, and although grave suspicious were entertained as to the culpable conduct of some of those in immediate charge of the patient, the evidence was not clear enough to justify any definite charge being made against any individual. *Post mortem* examinations were made in 13 instances out of the 24 deaths.

Of the seven entries in the Register of Accidents only 2—a fracture of the neck of the femur and a fracture of the radius, both in the case of female patients, and both accidental—require notice. The casualties were not followed by serious consequences.

The changes among the attendants have been as follows :—2 men and 9 women have resigned, 7 men have been dismissed, and 11 men and 14 women have been engaged.

According to an estimate submitted by Dr. Tuach, the asylum can accommodate 185 male and 260 female patients. There are at present on the register 175 men and 240 women, which figures allow, according to this estimate, 10 vacant beds on the male side and about 20 on the female side. It has, however, to be taken into account that 15 of the male and 18 of the female patients are paid for out of private funds, and that 22 of the female patients are boarders from the parish of Edinburgh. Strictly speaking, then, there are 25 male and 66 female beds in the asylum which are not occupied by patients chargeable to the district. If, as it is understood, it is the intention of the District Board to proceed with the extension of the Nurses' Home, that would slightly add to the capacity of the female side by withdrawing the nurses who presently sleep in the asylum. On the other hand, any large influx of patients from the lunatic wards of the Dundee Poorhouses would exhaust the spare accommodation referred to. It should be added that the estimate of the capacity of the asylum prepared by the General Board is considerably less than the one given above.

Plans have been prepared and approved of for the renovation of the present kitchen and the introduction of new cooking apparatus. The tables in the dining hall have been re-arranged in a manner which facilitates the service of the food and permits of a better classification of the patients. A mess-room has been provided for the female attendants, and a similar room is to be set apart for the male attendants.

The male-sick room is to be removed from its present position to the north dormitory, and the adjoining dayroom is to be used for the accommodation of infirm patients. The patients who are to occupy these two wards are to be wholly under the charge of female nurses. The present female sick-room is to be shifted to the wards known as the epileptic observation dormitory and

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the refractory ward. The Medical Superintendent's office and adjoining room on the male side and the matron's living rooms on the female side are to be converted into waiting rooms for visitors. The foregoing proposals are all in the right direction and are cordially approved of.

Since the asylum was last visited Dr. Rorie has retired from the office of Medical Superintendent and Dr. Tuach, who was appointed to succeed him, has entered upon his duties as head of the asylum.

The books and registers were examined and found correct.

DUNDEE DISTRICT ASYLUM,
9th and 10th August 1904.

There were on the 10th instant 379 patients on the register of the asylum in the proportion of 157 men to 222 women. All are paupers, the private patients having, since last visit, been transferred to Gowrie House, which is at present leased by the Directors of the Royal Asylum. This arrangement is terminable on a year's notice by either the District Board or the Directors.

Since 18th March 1904, the date of previous visit, the following changes have taken place :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted, . . .	0	2	22	31	55
Discharged recovered, .	0	0	13	18	31
Discharged unrecovered,	15	20	0	3	38
Died, ...	0	0	12	9	21

During the period dealt with in this report there has been a decrease of 35 patients in the number on the register. There is 1 male patient absent on statutory probation, and 3 males and 3 females absent on pass. The number resident is 372, all of whom were seen during the visit and were afforded an opportunity of making any statement they desired.

The deaths are registered as due to consumption in 6 cases, to heart disease in 4 cases, to gastro-enteritis in 4 cases, to general paralysis in 2 cases, to cerebral lesions in 2 cases, to pneumonia in 2 cases, and to senile decay in 1 case. In 12 instances, or in 57 per cent. of the deaths, a *post mortem* examination was made, and in 9 instances the relatives refused permission for an examination.

The Register of Restraint and Seclusion contains no entry. There is no Register of Escapes, and one should be obtained. One accident is recorded—a fracture of the right collar bone sustained by falling during an epileptic seizure. It is recommended that a Register of Minor Casualties be instituted in which bruises and other slight marks of injuries be recorded along with the name of the attendant in charge, and the circumstances under which these marks were sustained. Such a register would ensure attention being directed to the occurrence of minor casualties and their causes.

The changes in the staff are as follows :—1 attendant and 6 nurses have resigned, 1 attendant has been dismissed, and 5 attendants and 6 nurses have been engaged. The changes among the nurses continue numerous, but it is understood with approval that several improvements in the conditions of service have been, or are about to be, introduced, which, it is hoped, will conduce to a greater stability in the staff. A large extension of the present Nurses' Home is much required. The providing of separate, adequate, and comfortable accommodation for nurses, and of suitable cottages for married attendants, has in other asylums proved effective in increasing the length of service among both attendants and nurses. The average duration of service of the present staff is not satisfactory. There are 17 attendants and 18 nurses for day duty, which gives a ratio of 1 to 9 patients on the male, and 1 to 12 on the female side. The latter proportion is a low one. Four attendants and 7 nurses form the night staff, but there is to be an increase on the male side. With two exceptions, all the dormitories on the female side are in charge of night nurses, and consequently the female patients who are sick, suicidal, epileptic, or of faulty habits are under continuous night supervision. By these arrangements the safety of the patients is better secured, and their habits and conduct are improved. Systematic teaching of the staff receives attention, and

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6 nurses recently passed the examination and received the certificate of the Medico-Psychological Association for proficiency in mental nursing. A course of demonstrations on sickroom cookery is given by the trained lady cook who is now in charge of the kitchen.

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A favourable report can be given of the general condition in which the patients were found. As a rule, quiet and good order prevailed during the visit. The clothing was neat and tidy in appearance. The dining arrangements have been greatly improved, the tables have been placed so as to admit of a better classification of the patients and of a more orderly service of the meals. Grace is sung, all standing, and music is played during the meal. The conduct of the patients during the dinners was never quieter or more satisfactory. The introduction of family tables at which male and female patients sit together is recommended. It has been observed that in this asylum the meat is always served cold, but it is hoped that when the kitchen improvements are completed it will be hot when distributed. Attention is drawn to the fact that the percentage of male patients employed at farm work is the third lowest among Scottish asylums, and the lowest as to these engaged in outdoor work generally. The subject of employing patients at outdoor work and of its many advantages is fully discussed in the Forty-sixth Report of the General Board. There should be no difficulty in increasing the number so employed in this asylum.

It is understood with satisfaction that the male sickroom is to be transferred to the north dormitory on the ground floor, and that female nursing is to be introduced. The latter is one of the most important advances of recent years in the care of the male insane of a hospital ward. The female sickroom is to be removed to the south of the east wing so as to adjoin the epileptic dormitory and facilitate the night supervision.

The dayrooms and dormitories were in good order and several additions to the furniture were noted. The straw palliasses should be replaced by wire mattresses as they become worn out. The re-equipment and remodelling of the kitchen is in progress, and one of the adjoining rooms is to be converted into a mess-room for the male attendants. It is recorded with satisfaction that the laundry, which has for many years been in an inefficient condition, especially the drying arrangements, is to be properly equipped, and a hope is expressed that there will be no avoidable delay in getting this department into efficient working order. At the time of the visit the steam boiler was under repair, and consequently there was no steam power for cooking, laundry work, and lighting. The inconvenience of such a state of matters in winter would be serious. A reserve boiler should be supplied. No institution of this size is without a second boiler.

Dr. Tuach Mackenzie is showing zeal and interest in his work, and the progress which the asylum has made under his management is highly creditable.

Some of the registers were not written up to date. It is suggested that clerical assistance be provided.

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ROYAL EDINBURGH ASYLUM,
14th, 15th, and 16th June 1904.

Since the 9th December 1903, the date of last visit, the following changes have taken place in the population of the asylum :—

	Private.		Pauper.		Totals.
	M.	F.	M.	F.	
I. Certificated Patients—					
On Register, 7th December 1903,	165	178	286	287	916
Admitted, ...	19	23	76	102	220
Discharged recovered, . .	6	11	26	35	78
Discharged unrecovered, .	4	9	33	71	117
Died, ...	10	5	16	20	51
On Register at this date, . .	164	176	287	263	890
II. Voluntary Inmates—					
Resident at last visit, . .	6	8	0	0	14
Admitted, ...	5	3	0	0	8
Left, ...	2	3	0	0	5
Resident at this date, . .	9	8	0	0	17

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In the above statement effect has been given to the transference, since last visit, of 5 males and 3 females from the private to the pauper list, and 3 males and 8 females from the pauper to the private list.

From this statement it will be seen that there are at present on the registers of the asylum 907 patients, of whom 550 are pauper and 357 are private patients. Over a period of six months there has been a decrease in the pauper patients of 26, which is confined to female patients, and is due to the recent transference of 45 female patients to the temporary accommodation provided at the new Edinburgh District Asylum at Bangour. In the course of the next few days other 45 female patients will be transferred there, which will further relieve the accommodation on the female side of the West House.

The deaths are registered as due to general paralysis of the insane in 19 cases; to senile decay in 8 cases; to gross brain disease in 7 cases; to phthisis in 5 cases; to exhaustion from acute mental disease in 4 cases; to cancer in 3 cases; and to Bright's disease, epilepsy, heart disease, peritonitis and pneumonia, in 1 case each. *Post mortem* examinations were performed in 34 instances. When it is considered that 37 per cent. of the deaths were due to general paralysis, an incurable and rapidly fatal disease, the mortality from the more common diseases is, it will be seen, remarkably low, a fact which reflects favourably upon the general health of the inmates and upon the care with which they are tended.

The Register of Accidents contains 7 entries. None of these accidents was attended with fatal or serious consequences. They were as follows:—A dislocation of the right humerus and a fracture of the left humerus in the case of two female patients; a fracture of the right femur, a fracture of the right clavicle, a crushed toe, an attempt at suicide by swallowing putty, in the case of four male patients, and a scalp wound inflicted by a patient on a male attendant.

There are 46 entries in the Register of Restraint and Seclusion referring to the seclusion of 22 persons on account of violent excitement.

The number of patients who have escaped since last visit, and who have been absent for at least one night before being brought back is 6.

There are 206 patients in Craig House, the department of the institution where provision is made for patients paying the higher rates of board. Among such a number of private patients there is naturally a large diversity in the manifestation of the clinical forms of mental disease. To meet the requirements of these various classes the institution is admirably fitted in respect of the variety of its divisions. For the sick and infirm the small special hospitals afford excellent and easily accessible accommodation, and a further advantage consists in the secluded gardens which surround these separate hospitals. The less afflicted and convalescent patients reside in the numerous villas including Old Craig House. These homes, which are amply provided with domestic comforts, are conspicuous in so far as while they form integral parts of an asylum for the insane they present no suggestion of any method for the constraint of the free movements of the patients, who appear to go in and come out at the open doors unattended. In the main building of the institution the patients are carefully classified and graded in the different apartments according to their fitness for association with one another. These forms of classification have the great advantage of securing, so far as that is possible, the enjoyment of the ordinary amenities of life to those who can appreciate them, and the necessary amount of care and nursing to those who require it. It is interesting to note the extension of the night supervision of untrustworthy and restless patients which has recently taken place on the ladies' side. The advantages of night supervision among pauper patients are undoubted, but owing to the exactingness of private patients and their friends, and their desire for privacy, it is not easy to extend the same benefits to them. Dr. Clouston has, however, opened a second small dormitory with six beds for this purpose, and there are at this date 23 ladies sleeping under constant night supervision. With the same object a dormitory containing 14 beds has been set apart for the night supervision of ladies in the 4th Gallery of the West House. The extensive grounds surrounding Craig House presented a magnificent display of foliage and bloom from various kinds of flowering trees and shrubs. There is an abundant supply of lawns for tennis, croquet, and bowls, and a good golf course.

The proportion of attendants to patients is very high, being about 1 to 2·5.

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The West House contains 679 patients, of whom 137 are private patients, and 542 are paupers. The private patients in this division of the asylum have not varied much in numbers during the last three or four years owing to the pressure upon the accommodation caused by the excessive numbers of the city patients. Fortunately part of the new buildings of the Edinburgh District Lunacy Board's Asylum at Bangour are ready for occupation, and it is hoped that before the end of the year nearly 200 patients will have been transferred there. The removal of these patients will not only greatly relieve the accommodation at the West House, but it will prepare the way for the reception of private patients paying lower rates of board, which is the great work of the future before the Directors of the Royal Edinburgh Asylum. How that work is be undertaken and carried out is for the Directors themselves to decide, but the hope may be expressed that part of their scheme will include the reception of acute cases of the more curable forms of insanity at the lowest possible rates of board. Such a provision would enable many people to avoid the disagreeable necessity of applying to the parish for the relief of relatives suddenly or for the first time overtaken with mental derangement.

It was observed with approval that the night supervision of the patients in the West House is being gradually extended. There are 6 night attendants on the female and 5 on the male side.

The dinner at the West House was seen on one of the days of the visit. It was a substantial and abundant meal, and appeared to give satisfaction to the patients. The West House was found in excellent order. A great deal of painting has recently been done in the corridors and interior of the wards, and a great deal is in process of being done. The patients presented the usual appearance of freedom from constraint and general contentment combined with a readiness to express any grievance or opinion which they considered important or necessary. There was comparatively little excitement, limited chiefly to individuals in the wards for acute cases.

The dress of the inmates was throughout clean, neatly fitting, and in good repair. The general health of the able-bodied patients was as good as could be expected, but the hospitals were, as usual, filled with large numbers of frail and broken-down people, who form, it is believed a large proportion of the pauper admissions from the city.

The administration of the institution is permeated by a high sense of duty, which expresses itself in the medical work and in the relations of the patients and the members of the staff to one another.

The books and registers were examined and found correct.

ROYAL EDINBURGH ASYLUM,
6th, 7th, 8th, and 9th December 1904.

There were on the 6th instant 827 patients on the registers of the asylum. Of these, 12 are voluntary inmates, 351 are private patients, and 464 are paupers. These figures, when compared with the number at the date of the preceding entry, show a decrease of 5 as regards voluntary boarders, an increase of 11 in the number of private patients, and a decrease of 86 in that of the paupers.

The changes which have taken place since the date of last visit are as follows :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
I. Certificated Patients—					
Admitted, . . .	21	27	70	96	214
Discharged recovered, .	7	12	20	23	62
Discharged unrecovered,	4	3	105	55	167
Died, ...	4	6	21	29	60
II. Voluntary Inmates—					
Admitted, . . .	1	3	0	0	4
Left, ...	5	4	0	0	9
Absent on pass, . .	1	0	0	0	1

Since last visit 137 paupers have been transferred to the Edinburgh District Asylum at Bangour. The reduction in the number of paupers has enabled

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the asylum to admit all private patients sent to it able to pay the intermediate and lowest rates of board. The reception of these classes of patients was originally one of the main objects in providing the asylum, and it is therefore noted with pleasure that this duty, after being impracticable for many years, is again capable of being resumed. Since last visit 35 patients at the intermediate and lowest rates of board have been admitted, and if effective measures were taken to inform the medical profession of the ability of the asylum to receive patients at the lowest rates of board an increase in the admissions of this class of the insane would result. To provide accommodation, care, and treatment for insane persons in straitened circumstances at low rates of board constitutes the highest duty of a royal or chartered asylum.

With one exception all the deaths were due to natural causes. Of the 60 deaths, 14 are registered as due to general paralysis, 9 to phthisis pulmonalis, 7 to heart disease, 7 to senile decay, 6 to brain lesions, 4 to exhaustion from acute mental affections, 4 to cancer, 3 to kidney disease, 3 to pneumonia, and to psoas abscess, suicide, and internal injuries in 1 case each. In 41 instances, or in 68·3 per cent. of the deaths a *post mortem* examination was made. In 19 instances the consent to an autopsy was withheld by relatives.

The Register of Restraint and Seclusion contains 47 entries. They refer to the use of seclusion for periods varying from 2 to 8 hours in the cases of 18 patients, on account of maniacal excitement. Four accidents are recorded, (1) a suicide by hanging, the circumstances of which were fully reported to the Board and Procurator-Fiscal at the time of its occurrence, (2) shock to and scorching of the head laundress by a gas explosion in her room, (3) attempt at suicide by means of a piece of crockery, and (4) a fracture of metacarpal bone of middle finger during an excited attack. Six patients escaped, and were absent for at least one night before being brought back.

The changes among the nursing staff since last visit are as follows :—9 attendants and 14 nurses have resigned, 4 attendants and 1 nurse have been dismissed, and 12 attendants and 11 nurses have been engaged. The dismissals were not due to any misconduct affecting the patients. The night staff in the West House has been increased, and now consists of 6 nurses and 4 attendants. Two of each sex are engaged in patrolling the house, and 4 nurses and 2 attendants are in continuous charge of dormitories containing the recently admitted, the suicidal, the epileptic, and others who require careful night watching. There are 109 patients, 47 men and 62 women, who sleep under constant night supervision, which secures their safety and conduces to their improvement in habits, behaviour, and mental well-being. The use of narcotic medicines is exceptionally small in this asylum—the average number of sleeping draughts given nightly during the past month on the female side of the West House, containing 329 patients, is 2·7.

The healthy occupation of the patients, which promotes their contentment, continues to receive special attention. The numbers registered as daily employed are 59 private and 126 pauper males, and 117 private and 140 pauper females—all at occupations suited to their capabilities. A new curling-pond has been completed in close proximity to Queen's Craig, and a full-sized croquet-green is in process of formation south of New Craig House. This and other work in the grounds is reserved for male private patients. Outdoor games and recreations are well organised and constitute valuable therapeutic agents in the general treatment of the inmates. Associated entertainments, such as concerts, dances, theatricals, and lectures are regularly and liberally provided. A large number of patients have carriage exercise ; in the course of the year 112 were driven to the seaside villa at Cockenzie and spent the day there. Forty-four patients resided at this villa for several weeks during the present year. There are 10 patients who are given parole beyond the grounds, and no less than 116 are granted this privilege within the boundaries of the asylum estate. This large amount of liberty, which conduces to happiness and contentment, is one of the features in the administration which is most commendable. The number who attend Divine service is 372, which gives the creditable proportion of 45 per cent of the asylum population.

The general result of the visit was to confirm the opinion expressed in previous reports as to the great energy and distinguished ability which are displayed by Dr. Clouston in the management of the asylum. The patients in New Craig House and the six adjoining villas were found admirably provided for. The variety of accommodation in these houses, and also in

the main building, allows of a complete classification of the patients, which is highly advantageous and conducive to their comfort and mental welfare. The special needs of each class are carefully studied and efficiently met, and the accommodation of every class is excellent. Every patient was individually seen, and though a few protested against what they regarded as undue detention, there were many who voluntarily acknowledged the comforts they enjoy and the kindness and consideration with which they are treated.

Myreside Cottage, a home for six old gentlemen, has been much improved internally, and its surrounding grounds have been most tastefully laid out. The homely feeling which characterises this dwelling always attracts special attention.

The West House, with its separate hospitals, was in excellent order. As a result of a large amount of repainting and redecoration the wards never looked brighter and more cheerful than at this visit. Each ward is substantially and comfortably furnished, and the dormitories were clean, bright, and well aired. The bedclothing was ample for the season. The patients were, with few exceptions, quiet and orderly in demeanour, and except for the usual appeals for discharge from a small proportion of each sex, they were, generally speaking, contented. The health of the house is good ; no disease of a zymotic character has occurred for a considerable period. The clothing of the patients was varied as to material, and neat in appearance. The dinners were abundant and well-cooked meals, and enquiries elicited expressions of satisfaction. As the mess-room of the nurses has been so acceptable and successful in its arrangements, it is recommended that one be provided on the male side for the attendants.

The Edinburgh Fire Master has reported on the extinguishing apparatus in connection with Craig House and villas, and his recommendations are under the consideration of the Managers and Dr. Clouston. In the meanwhile each of the corridors is to be provided with six fire buckets and a hand pump of the most efficient kind. It is also understood that a light curricle fire escape on wheels is to be obtained, which will be of service for those villas which it will be impossible to provide with effective outside escape staircases.

The medical records and case books are particularly well kept, and the official registers were found correct and written up to date.

Edinburgh District Asylum, Bangour, 20*th October* 1904.

The parish of Edinburgh was erected into a Lunacy District by an Order of the General Board, dated 29th January 1897. As little progress had been made with the erection of permanent buildings, and as the necessity for accommodation had become so urgent, the District Board resolved in 1902 to provide five houses constructed of wood and iron. These were completed and ready for occupation in May of this year. They were inspected by the General Board on 2nd and 18th May, and were, by a minute dated 19th May, duly approved of and adopted as a District Asylum for the Edinburgh Lunacy District. Patients were received on June 1st, and since that date 90 men and 92 women have been admitted—1 man has been discharged, and 1 woman has died. There is 1 woman absent on pass, and 2 men are absent by escape. The number resident is 87 men and 90 women, all of whom were seen in the course of the visit.

The cause of the death was chronic nephritis. As there was no mortuary, a *post mortem* examination could not be made. This building is, however, now being erected on a suitable site.

There has been no employment of restraint or seclusion in the treatment of any patient. Four casualties are reported, but they are slight in character. Four escapes have occurred, and in regard to the 2 men at present absent by escape no anxiety as to their welfare is entertained. They ran away together from the harvest field.

The five houses which have been erected on the western portion of the asylum site are ultimately intended as accommodation for male working patients. They have been well designed internally, and in their construction non-inflammable materials have been largely used. One of the houses has, by temporary partitions, been made to afford accommodation on the ground floor for the Medical Superintendent and the Matron, and for the stores, and on

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the upper floor there are bedrooms for 12 nurses. Each of the four houses in occupation by patients has a dayroom, dining hall, kitchen, 3 dormitories single rooms, and well-planned and efficiently-equipped bathroom and lavatory. From the dormitories are two staircases which, in case of fire, will afford alternative exits. It is understood that verandahs are to be added to the south front of these houses, to afford shelter for the patients. Each house has been suitably and comfortably furnished, and in a way which indicates a thoughtful consideration for the care and treatment of the patients. Pictures, plants, and other objects of interest have been liberally supplied, and it was noticed with satisfaction that each dayroom had a well-filled bookcase, and that a piano had been provided in each of the female dayrooms. The dormitories have an aspect of comfort, and the beds, which are of good design, are furnished with wire and hair mattresses, and are amply supplied with coverings. The heating of each house is by hot water conveyed in pipes from a boiler in the basement. The electric light is installed in every room, and electric lamps have been erected throughout the grounds. Telephonic communication between the houses is complete. The laundry and accommodation for the electric plant have been provided in a separate building. The laundry is said to be adequate for present requirements, and it is well equipped.

The condition of the patients was in all respects highly satisfactory. Except a few of the women who were noisy, they were quiet and well-behaved, and no complaints were made apart from the subject of detention. Many spoke favourably of their treatment. The clothing of both sexes was of good quality, and that of the women pleasantly varied. The personal neatness of the patients showed that great attention is paid to this feature in their care. The dinner seen during the visit consisted of broth, bread, boiled beef, and potatoes. It was a liberal and well-cooked meal, most neatly served, and evidently much appreciated by the patients. The crockery and equipment of the tables are homelike in character. The diet table is satisfactory both as to quantity and variety. For breakfast, both porridge and milk and tea and bread and butter are given. There are four meat dinners and one of fish during the week. The allowance of bread for supper is 8 ounces for the men, and 6 for the women. The laundry and kitchen workers have bread, butter, cheese, and tea for lunch. These details are sufficient to show that the patients are adequately fed. The supply of vegetables from the asylum garden has been abundant.

The employment of patients is exceptionally well attended to. Fifty-nine of both sexes, or 66 per cent. of the men and 65 per cent. of the women, are daily engaged in useful work. The number of men employed on the farm, garden, and grounds is sometimes 47 or 52 per cent., which shows that full advantage is taken of the abundance of outdoor labour afforded by the asylum estate. The beneficial effects of such work in the treatment of the patients are universally admitted.

The day staff consists of 6 attendants and 15 nurses. These figures give a ratio of 1 to 9 patients, which indicates a day staff of sufficient numerical strength. For night duty there are four nurses and 1 attendant, the proportion being 1 to 36 patients. The Matron has charge of both the male and female houses, and it is recorded with approval that one of the male houses is wholly staffed with nurses. In this way the nursing of the male sick and infirm patients is brought into line with that of a general hospital. It has now been abundantly proved that female nurses have an inhibitory and beneficial influence on the conduct of the male insane—their care of them is gentler and more sympathetic, and the wards are kept in better order. Four men and five women were confined to bed, and the nursing arrangements for their care and supervision were all that could be desired. There have been no resignations or dismissals among the staff.

The establishment has been organised by Dr. Keay in a most satisfactory manner, and its administration by him is characterised by energy and ability.

It has been found that on account of the provision of a nurses' home in the administrative house 50 patients can be accommodated in each of the houses. Twenty patients are therefore to be transferred from other asylums. The number resident will then be 200. Good progress is being made with the building of the administrative centre and its admission wings. The masonry of the permanent laundry is nearly completed, and a beginning has been made with the erection of the kitchen and stores. The Medical Superintendent's

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house is being built. It is understood that four homes for females are to be proceeded with. The foundations of the power-house have not been excavated. As none of the buildings will be available for use or occupation until the power-house is in full working order, no time should be lost in proceeding with this essential department.

The capacity of the reservoir, which is nearly completed, is estimated at 13½ millions of gallons, and the capacity of the pure water tank at the filters is 123,750 gallons. The water supply will therefore be adequate for all prospective requirements. The septic tanks and filtering beds are now in working order and in use.

The following statement shows the number of pauper lunatics chargeable to parish of Edinburgh on 1st January 1894 and 1904 :—

Year.	In Royal Edinburgh Asylum.	In Poorhouse Wards.	In Other Asylums.	In Private Dwellings.	Total.
1st Jan., 1894	346	79	6	310	741
1904	389	234	169	294	1,086

During the past ten years there has been an increase of 345 patients chargeable to the parish. The number in establishments (asylums and poorhouse wards) on 1st January 1904 was 792, and in private dwellings 294. The percentage in private dwellings is 27·1, which is much higher than obtains in any other urban parish in Scotland. The average percentage of the pauper insane in private dwellings in Scotland is 18·7.

The official registers were examined, and found regularly and correctly kept.

Elgin District Asylum.

ELGIN DISTRICT ASYLUM, *4th February* 1904.

The following changes in population have occurred since the asylum was last visited :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On Register 10th July 1903,	6	5	69	91	171
Admitted, . . .	0	2	9	12	23
Discharged recovered, .	0	1	2	5	8
Discharged unrecovered, .	0	0	0	1	1
Died, ...	1	1	5	2	9
On Register at this date, .	5	5	71	95	176

All the patients were resident and were seen in the course of the visit.

There are no entries in the Register of Restraint and Seclusion. One patient escaped and was absent for at least one night before being brought back. The Register of Accidents contains one entry referring to the fracture of the fibula in the case of a female patient. This accident was the result of a fall, and no blame attaches to anyone in connection with it.

The deaths are registered as due to gross disease of the brain in 2 cases, to epilepsy in 2 cases, and to the following affections in 1 case each—namely, general paralysis, heart disease, phthisis, gastric ulcer, and exhaustion from acute mania. *Post mortem* examinations were made in 3 instances. The management of the institution continues to be efficient. The patients were quiet, free from excitement, and orderly in their demeanour. Their dress was neat and in good repair, and they are suitably fed. The general physical health of the inmates was satisfactory, and those who required special attention on account of physical ailments or weakness were comfortably provided for in the hospital wards. The number of resident patients has only slightly increased, and there are still some vacant beds notwithstanding

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that a few boarders from the Orkney district are in the asylum. This freedom from overcrowding is certainly exceptional, but it cannot be expected to continue long, even at the present slow rate of increase. In this connection it may be pointed out that there is a falling-off in the number of patients boarded out by some of the larger parishes in the county. The following statement will show that the number of patients boarded out by the majority of these parishes is below the Scottish average.

	In Asylum.	Outside.	Total.
Drainie,	13	4	17
Duffus,	9	1	10
Dyke,	7	0	7
Elgin,	41	8	49
Forres,	29	4	33
Urquhart,	6	0	6
Rothes,	9	3	12
	114	20	134

This gives over all a percentage of 14·9 for these parishes, as against the Scottish percentage of 23.

The new water supply is abundant, and the artificial pressure from the small engine in the boiler-house is sufficient to cope with any outbreak of fire that may occur. An examination of the means of exit from the dormitories in the wings of the building revealed the fact that some of them are not provided with alternative exits. The attention of the District Board is seriously directed to this fact. The question was discussed with Dr. Mackay and Mr. Hendry, and the conclusion was come to that on the female side an outside iron balcony stretching from one dormitory to the other might serve this purpose, and that on the male side outside iron staircases of simple construction would meet the requirements of the situation.

The asylum was found as usual in a perfect state of good order and cleanliness. The men's quarters at Bilbo Hall were inspected and found satisfactory.

The books and registers were examined and found correct.

Elgin District Asylum,
24th and 27th June 1904.

There were on the 24th instant 173 patients—72 men and 101 women—on the register of the asylum. Of these, 6 males and 5 females are private patients, and 66 males and 96 females are paupers. One female has been transferred from the pauper to the private list. All the patients were in residence and seen in the course of the visit.

The following changes in the population have taken place since 4th February 1904, the date of previous report :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted,	3	0	6	5	14
Discharged recovered,	1	1	5	0	7
Discharged unrecovered,	0	0	1	0	1
Died,	1	0	5	3	9

The number resident has decreased by 3. The recoveries were 50 per cent. on the number of admissions, and the death rate continues high.

The causes of death are registered as phthisis pulmonalis in 3 cases, as brain disease in 3 cases, and as chorea, senile asthenia, and chronic bronchitis each in 1 case. *Post mortem* examinations were made in 3 instances.

Neither mechanical restraint nor seclusion has been employed during the period under review. Two casualties have occurred, but they were not of a serious character. There has been no escape. The changes among the staff consist of 4 nurses leaving the service of the asylum and of 3 being engaged. As regards the percentage of male patients employed in farmwork, this institution stands fourth among Scottish asylums, a fact which is creditable to

the present management. In agricultural work the percentage is 36, and when those employed in the grounds and garden are added it is 51. Healthy and regular outdoor work is one of the best means of treatment; it is conducive of physical well-being, sound sleep, and contentment. It is therefore understood with satisfaction that additional land has been leased by the District Board, which the free labour of the patients should assist materially in rendering profitable to the asylum. On account of a few exceptional circumstances the accounts of the farm last year show a deficit, but it is also noted that the farm produce supplied to the asylum is charged for at prices lower than those in other institutions. The milk supply is abundant and of good quality, and consequently milk is given as a beverage at certain meals.

The patients in both divisions were orderly and well-behaved and free from complaint. Those at Bilbohall are suitably and comfortably provided for. The clothing of both sexes was satisfactory, that of the females being exceptionally neat and tasteful. A well-cooked and abundant dinner was served during the visit. There were 2 men and 8 women confined to bed; the majority of the latter were suffering from the infirmities of old age.

It was everywhere apparent that the care of the patients is kindly and efficient, and that the special requirements of many of the inmates are liberally met.

The scrupulous cleanliness and excellent order in which the wards were found merit unstinted praise. The dayrooms are bright and cheerful, and the dormitories and beds are most comfortably furnished. The extension of the lavatory in connection with the female sickroom, which is nearing completion, is a great improvement, and it was noted with approval that it is being equipped with sanitary fittings of the best design.

Plans for providing alternative exits from the upper dormitories are to be submitted to the General Board. On the female side it is proposed to erect an iron balcony along the east wall, but as this would take it past the staircase it is suggested that it be placed along the west wall. On the male side an outside iron staircase is to be built, which will serve both the first and second floors. An alternative plan, which is strongly recommended, shows an extension of the lavatory, which will provide a bathroom, the roof of which would form a broad balcony for this escape staircase and greatly increase its efficiency. The present lavatory is not in a satisfactory condition; its walls are damp and the plaster work is crumbling away. The bath, which is in the centre, is misused by the patients, and its separate accommodation is therefore called for.

Fire buckets should be added to the extinguishing appliances; they are ready for instant use and anyone can handle them. If placed at convenient sites throughout the asylum, they will prove most effective in the first moments of a fire.

The registers were examined and found regularly and correctly kept.

Fife and Kinross District Asylum, *9th and 10th March* 1904.

The following changes in population have occurred in the interval covered by this report:—

	Private and Pauper Patients.		
	M.	F.	TOTALS.
On Register 29th October 1903,	271	288	559
Admitted,	25	20	45
Discharged recovered,	8	7	15
Discharged unrecovered,	7	4	11
Died,	8	12	20
On Register 9th March 1904,	273	285	558

Of the patients on the register at the above date, 9 women are private patients. One man was absent on statutory probation and 1 man and 1 woman were absent on pass. With these exceptions all the patients were resident and were seen in the course of the visit.

The causes of death as entered in the Register of Deaths may be classified as follows:—Gross disease of the brain and spinal cord 6 cases, tubercular and fibroid phthisis 3 cases, enteritis 2 cases, heart disease 2 cases, general

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paralysis 2 cases, epilepsy, cirrhosis of the kidneys, cystitis, cancer, and senile decay 1 case each. *Post mortem* examinations were made in every instance except 2, in which the consent of the relatives was withheld. Two hundred and forty-two patients, 140 men and 102 women, attended Divine Service last Sunday.

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There is no entry in the Register of Restraint and Seclusion. Two patients escaped and were absent for at least one night before being brought back. There is only one entry in the Register of Accidents, which refers to the fracture of the femur in an elderly female patient through slipping and falling on ice. A record of minor accidents and bruises is regularly kept.

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Three hundred and seventy-five patients, 187 men and 188 women, were industrially employed at the time of the visit. Of these, 54 men were employed on the farm, 47 women in the laundry and kitchen, and 74 women at sewing or knitting. The changes in the nursing staff have been numerous. Two men and 11 women have resigned, 2 men and 3 women have been dismissed, and 4 men and 15 women have been engaged. Of the 5 individuals dismissed from the service, in only one instance did the fault directly affect the relations of the attendants to the patients—that was in the case of a male attendant who was suspected of roughly handling a patient.

The asylum has 545 beds, and there are at present 558 patients on the register, which is 13 above the proper number; but as there are 15 spare beds on the female side, it follows that the male side is overcrowded to the extent of 28 patients. In the circumstances it is satisfactory that the population has not increased in the interval covered by this report, and that there is a prospect that the new additions to the hospital will be ready for occupation about the end of this year. It is mainly owing to Dr. Turnbull's constant and successful endeavours to remove chronic harmless lunatics from the asylum to private care that the population of the asylum is not increasing through the accumulation of that class of the insane. Since the beginning of last November until now 7 patients, 4 men and 3 women, have been placed in private care, 4 of them with strangers and 3 with relatives.

The asylum was found in admirable order in every department.

The patients were, as a whole, orderly in their demeanour and generally free from excitement. An excellent tone pervaded the whole establishment, which was apparent in the relations of the patients and the staff to one another and in the absence of any constraint or distrust in the manner in which the patients expressed themselves in presence of the officials.

The dinners on both days of the visit were suitable meals in every respect; that on the second day, which consisted of broth, bread, potatoes, and small meat pies (1 to each patient), was particularly popular.

The main asylum is fairly well protected in case of fire by means of alternative exits. It is strongly recommended that a corridor of communication should be made on the dormitory floor between the two divisions of the laundry block, which are semi-detached buildings. This could be done at a comparatively trifling outlay and would ensure the safety of the inmates of these rooms. It is hoped that the District Board will not allow the hospital additions to be finished without securing free alternative exits from the dormitory floors. It was pointed out in a previous entry how this could be simply done by means of iron bridges between the adjacent parts of the new wings and the main building of the hospital.

Since last visit the electric light installation has been completed. The cost has, it is understood, been comparatively moderate without any decrease in efficiency. A new detached meat store has been erected. Alterations in the main kitchen, which have for their object the introduction of new cooking apparatus, are in progress. The laundry machinery is antiquated and inadequate, and stands much in need of renewal.

The books and registers were examined and found correct.

FIFE AND KINROSS DISTRICT ASYLUM,
25th and 26th November 1904.

There were on the 25th instant 571 patients on the register of the asylum. Of these, 7 females were private patients, and 275 males and 289 females were paupers. One male was absent on statutory probation, and 2 females

were absent on pass. All resident, 568 in number, were seen and afforded an opportunity of making any statement they desired. Appendix B.

Since the previous visit, on 9th March 1904, the following changes in the population have taken place :— Commissioners' Entries.

	Private and Pauper Patients.			Royal and District Asylums.
	M.	F.	totals.	
Admitted, ...	42	55	97	
Discharged recovered, ...	13	17	30	Fife and Kinross District Asylum.
Discharged unrecovered, . . .	12	16	28	
Died, ...	15	11	26	

The above statistics, when compared with those in the preceding entry, show an increase of 3 males and 10 females in the number resident. This addition to the population would have been much greater were it not for the successful efforts of Dr. Turnbull in discharging the harmless and easily-managed patients to domestic or private care. Of the 28 discharged unrecovered, 13 were sent to the care of relatives and are now maintained by them, and 8 have been boarded out with unrelated guardians and are paid for by their respective parishes. Seven others were transferred to asylums of the lunacy districts to which their parishes of settlement belong. There are 2 patients on pass and 1 on probation with a view of testing their fitness for outside care before finally discharging them. The earnest endeavours of Dr. Turnbull to prevent undue accumulation merit recognition.

At this date there are 28 patients in excess of the accommodation in the male division, and there are vacancies in beds for 6 patients on the female side. The new wings of the hospital block, each for 50 patients, are now so far advanced that temporary painting is being carried out, and it is expected that these extensions will be ready for occupation early next year.

Of the 28 deaths, 7 are registered as due to organic brain diseases, 4 to inflammatory chest affections, 3 to pulmonary tuberculosis, 3 to kidney disease, 2 to general paralysis, 2 to cancer, 2 to heart disease, and 1 to each of the following causes:—perforation of the bowel, acute suppurative tonsillitis, and suicide. In 24 instances, or in the creditable proportion of 92·3 per cent. of the deaths, a *post mortem* examination was made. The medical records continue to be fully and intelligently kept.

Neither mechanical restraint nor seclusion has been resorted to in the treatment of any patient during the period covered by this report. Four accidents are recorded—(1) a fracture of a humerus due to a fall in the grounds, (2) a fracture of a rib suspected to have been caused by a push from an attendant, who, after full inquiry into the circumstances, was reprimanded, (3) a fracture of a rib, the cause of which has been investigated by the Procurator-Fiscal, but as yet no decision as to the guilt of the attendant involved has been arrived at, and (4) suicide by precipitation and drowning. This patient had so much improved mentally as to disarm suspicion, and to complete his convalescence he was sent to the separate villa to engage in remedial employment. He walked away and threw himself into the Eden at Springfield. Every effort was made to resuscitate him after rescue, but without success. There have been 4 escapes in which the patients were absent for at least one night before being brought back.

The changes in the nursing staff have been as follows :—3 attendants and 15 nurses have resigned, 3 attendants and 2 nurses have been dismissed, and 7 attendants and 14 nurses have been engaged. The dismissals were on account of inefficiency, intemperance, and absence without leave. For day duty on the male side there are 24 attendants and 3 nurses, and in the female division there are 29 nurses. The staff is maintained at adequate strength, there being 1 for every 10 patients in both divisions of the asylum. There are 4 attendants and 5 nurses on night duty. The changes among the nurses are more numerous than is desirable, but those among the attendants and artizans are comparatively few. The reason is that 51 per cent. of the male staff are married, and are either provided with cottages on the asylum estate or are allowed an addition to their wages in lieu of rent. The average duration of service of those who have house accommodation is over 11 years. It will thus be seen that extended provision of cottages for married attendants would be certain to increase further the stability, and at the same time the quality, of the male staff. Tuition in mental nursing is systematically

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carried on, and no less than 20 members of the staff have gained the certificate of the Medico-Psychological Association.

The condition of the patients during the visit afforded evidence, as usual, of the kindly and judicious way in which they are cared for. They were all well and neatly clothed, and their physical condition bore testimony to their being adequately fed. The dinners were, on both days of the visit, abundant and palatable meals. Except in one of the female wards there was a complete absence of noisy excitement, and no complaint of a reasonable character was made. Eleven men and 16 women were confined to bed in the hospital section, and their treatment and nursing were evidently of the highest standard. Those usefully employed in and outside the asylum are in the proportion of 67 per cent. of the men, and 69 per cent. of the women. The number who attended Divine service last Sunday was 245, or 43 per cent.

The wards throughout presented a very pleasing and comfortable appearance. The dormitories were scrupulously clean and well aired, and the bedding was in a satisfactory condition. The electric light installation has now been in use for over a year, and is found to be a most effective illuminant, and to possess hygienic and other advantages of great value. Each single room has been provided with a light, which facilitates the supervision of its occupant. The kitchen in the main asylum has been enlarged and equipped with three new cooking boilers. This improvement was greatly needed.

Attention is again drawn to the inadequacy of the present laundry to overtake properly the large and increasing amount of work devolving on it. Its present size and equipment are the same as they were in 1870, when the population was much less than half what it is at present. Washing machinery and efficient drying chambers are necessary if the work is to be expeditiously and satisfactorily overtaken. The laundry-room is much too small for present requirements, and a four-roller calender should be provided for the mangling and ironing of the sheets, towels, &c. It is understood that great difficulty is experienced in keeping up a proper supply of sheets for the wards. There is practically no dispatch-room in the present building. The District Board has been most liberal in providing hospital, kitchen, and other accommodation, and in adding to the land in order to keep the asylum abreast of the requirements of its increased population. It is recommended that the enlargement and re-equipment of the laundry be now taken in hand so as to render it as efficient as the other departments of the asylum.

A new series of sewage settling tanks and irrigation terraces have been constructed on one of the fields of the new farm. They are of sufficient size to deal with all the drainage of the asylum. By this method both the solid and liquid constituents of the sewage are made available for the fertilisation of the farm. The effluent from the filtration beds is quite clear.

Telephonic communication has been extended to the principal sections of the asylum, and to the Medical Superintendent's house. It is of great service in the administration of the institution.

It is understood that a contract has been accepted for erecting bridges between the dormitory floor of the present hospital and the new wings, as recommended in previous entry.

Dr. Turnbull is aided in the medical charge of the asylum by two Assistant Medical Officers, Dr. Anderson and Dr. Gane. The visit left a pleasing impression, both as regards the general and medical management of the institution.

The official registers were examined and found regularly and accurately kept.

Glasgow Royal Asylum.

GLASGOW ROYAL ASYLUM,
18*th and* 19*th April* 1904.

On the 18th instant there were 433 patients on the registers of the asylum. Of these, 5 gentlemen and 10 ladies are voluntary boarders, 179 gentlemen and 238 ladies are under certificates, and 1 man is a pauper. There were two ladies absent on statutory probation, and 1 gentleman and 1 lady absent on pass. The number in residence is 429, all of whom were afforded an opportunity of making any statement they desired.

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The changes since the visit of 25th November 1903 are as follows :—

	Private Patients.		
	M.	F.	Totals.
I. Certificated Patients—			
Admitted, ...	23	18	41
Discharged recovered, . .	8	10	18
Discharged unrecovered, . .	7	12	19
Died, ...	6	5	11
II. Voluntary Inmates—			
Admitted, ...	1	1	2
Left, ...	2	8	10

The deaths are registered as due to general paralysis in 5 cases and to heart disease, phthisis pulmonalis, nephritis, pleuro-pneumonia, sub-acute peritonitis, and toxæmia, each in 1 case. These causes were verified in 8 instances, or in 72·7 per cent of the deaths, by a *post mortem* examination.

Neither mechanical restraint nor seclusion has been used in the treatment of the patients since last visit. There are 9 entries in the Register of Accidents, but the injuries sustained, except one to an eye which involved loss of its sight, were not of a serious character. One patient escaped and was absent over night before being brought back.

The changes in the staff are as follows :—5 attendants and 9 nurses have resigned, and 6 attendants and 9 nurses have been engaged. There have been no dismissals. The staff includes 3 attendants and 3 nurses who have been over twenty years in the service of the institution, and 16, or 21 per cent., reckon over 5 years' service. There are 13 who have served from 4 to 2 years. The changes among the junior staff have, however, been numerous —40·7 per cent. have served under 1 year. With a view of lessening these changes and of attracting eligible candidates for the nursing of the patients, a villa in the grounds and a ward in the West House have been converted into comfortable accommodation for nurses. The erection of a Nurses' Home is under the consideration of the Directors. Adequate and comfortable provision for the staff bulks largely as an inducement to junior members to continue in the service of the institution.

The present condition and management of the asylum created a very favourable impression. The patients were as a rule contented and many gratefully acknowledged the kindly care and treatment which they receive. Manifestations of excitement were confined to a few ladies in the East House. Private interviews were granted to those who objected to their detention, but they were found mentally unfit for discharge. The dinners seen during the visit were liberal and popular meals, and it was evident that the dietary of the patients receives much consideration. The introduction of nurses into the male sick ward of the West House is recorded with approval, as it is an indication of the desire to give the asylum as much as possible a hospital character. This will be further developed when the two male wards in the East House are reconstructed so as to make them suitable for the reception of acute and sick cases, as this section is to be staffed by nurses. Eighteen gentlemen and 17 ladies were in bed, some in the open air but under a verandah. Fifty-one gentlemen engage in outdoor work in the grounds, and 52 assist in the wards and in the workshops. One hundred and twenty-seven ladies are registered as usefully employed. The number on parole is large, 6 gentlemen and 2 ladies enjoy the privilege of going beyond the grounds, and 37 gentlemen and 80 ladies are on parole within the grounds. The figures indicate the kindly and liberal manner in which the patients are treated and trusted. The number who attended Divine service last Sunday was 204, 94 gentlemen and 110 ladies. The erection of a Church capable of seating 300 has been commenced, a provision which will be acceptable to the patients and staff.

All parts of the institution were scrupulously clean and in excellent order. The wards and bedrooms for the higher class of patients are handsomely furnished, and provided with comforts suited to their requirements, and the accommodation for those paying intermediate and lower rates is thoroughly satisfactory and comfortable. The laundry, especially the washhouse, is not an efficient department, and its reconstruction and re-equipment are under

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consideration. Many other improvements and alterations are in contemplation; a new bowling green is in course of construction on an excellent site.

The extent to which patients in this asylum consists of persons received and maintained at low rates of board is indicative of the charitable spirit in which the institution is managed. There are at present 50 patients whose rate of board is under £40 per annum, and it is understood that admission is never refused to a hopeful patient in straitened circumstances who is not able to pay the lowest nominal rate. Several cases of this kind have been admitted during the past year. Charitable aid is also extended to those who pay the higher rates of board, and the many benefits and advantages which accrue to these patients on account of this benevolence have been fully detailed in previous reports.

The official registers were examined and found regularly and correctly kept.

GLASGOW ROYAL ASYLUM,
22nd and 23rd November 1904.

The following changes have occurred in the population of the asylum since last visit :—

I. CERTIFIED PATIENTS—

	M.	F.	TOTALS.
On register 17th April 1904,	180	238	418
Admitted,	42	29	71
Discharged recovered,	14	8	22
Discharged unrecovered,	17	21	38
Died,	11	6	17
On register 21st November 1904,	180	232	412

II. VOLUNTARY INMATES—

Resident at last visit,	5	10	15
Admitted,	5	8	13
Left,	3	5	8
Resident 21st November 1904,	7	13	20

One gentleman and 5 ladies were absent on statutory probation, and 1 lady was absent on pass. The remaining 425 patients were resident and were seen in the course of the visit.

The death-rate is, as usual, low. Seven patients died of general paralysis, and four of organic disease of the brain. The remaining six deaths were due each to the following causes, namely :—heart disease, acute alcoholism, senile decay, bronchitis, ulceration of the intestines, and suicide by hanging. *Post mortem* examinations were made in 11 instances. The patient whose death was due to suicide was under strict supervision for the purpose of frustrating the very occurrence which ended his life. He managed, however, on one occasion to elude his attendant for just so long a time as enabled him to commit the act, and although he was immediately cut down his heart's action was so weak owing to disease of that organ that resuscitation was not possible.

Of the entries in the Register of Accidents only two are of sufficient importance to require notice. These are (1) a fracture of the lower jaw in an attendant, caused by a blow received from a patient ; and (2) a punctured wound of the pericardium, which was self-inflicted by means of a penknife with suicidal intent. Neither of these accidents was followed by serious consequences.

There are 3 entries in the Register of Restraint and Seclusion. These refer to the restraint of one person on two occasions for surgical reasons, and to the seclusion of one person on one occasion on account of excitement and violence.

The following changes in the nursing staff have occurred in the interval covered by this report :—seven men and 5 women have been engaged, 5 men and 3 women have resigned, 2 men were dismissed, and 1 woman died.

The day staff consists of 35 nurses and 25 attendants (4 of the nurses are employed in the gentlemen's division of the West House). This gives a proportion of 1 attendant to about 7 patients. There are in all 11 night attendants, which gives a proportion of 1 attendant to about 36 patients.

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The employment of patients in useful work deserves notice on account of its extent and importance. Two hundred and sixty-six patients were working at the time of the visit. A variety of occupations is provided, among which gardening and agriculture occupy a prominent part. No less than 53 gentlemen were thus employed. The industrial occupation of the ladies is limited to the usual household pursuits.

The asylum as a whole was found, as usual, in good order. A considerable amount of painting, papering, and refurnishing has been done since last visit. In an institution of this kind such repairs have to be constantly made, but some of the alterations of a more important kind demand separate notice. A new bathroom, nicely tiled and fitted with all modern improvements, has just been completed in the gentlemen's division of the West House. For the purpose of regulating the temperature of the water for the spray and plunge baths a fixed and protected thermometer has been placed against the wall with its bulb in a small mixing chamber. By merely regulating the taps the temperature of the water can be fixed to any required degree. The process is simple, inexpensive, and a valuable one for asylums where testing the water for each bath is necessary in order to obviate accidents. Extensive alterations and improvements are being made in the quarters for nurses and attendants. New dormitories are being provided for the nursing staff of both sexes, and these are being furnished with lavatories and sanitary improvements of the latest pattern. A new billiard-room has been provided for the gentlemen in the East House, and the billiard-room in the West House is being renovated and provided with a new table. Estimates have been accepted for renewing the cooking apparatus in the East House kitchen. The present ovens are to be replaced with gas-cooking ranges, and a servery with hot plates is to be erected in connection with the dining-room.

The new church in the grounds has recently been formally opened for service. Internally the arrangements are artistic and correspond to the modern system of church architecture, with Communion table, pulpit, and lectern. The decoration of the interior is in excellent taste; the furnishings are elegant and comfortable, and the building is capable of seating 300 persons. The general effect of a detached building set apart for Divine service is undoubtedly good in an asylum, for it conduces towards an attitude of respect on the part of the inmates for religious observance and it approximates to the conditions of ordinary social life.

Everything that was seen in connection with the care and treatment of the patients was favourable to the management of the asylum. Especially was this the case in respect to the hospital system of treatment of acute and recently-admitted patients which has been so largely extended under Dr. Oswald's superintendence. The open-air bed treatment of patients whose physical and general nervous condition is seriously affected, but who are capable of improvement, is a distinctive feature of the system. It is said to act beneficially in certain cases by restoring the physical health, allaying restlessness, and often promoting mental health. At the time of the visit 14 patients were being thus treated. It was apparent that the patients were willing subjects of the system, and those of them who were questioned readily answered that they preferred being outside to being indoors.

The books and registers were examined and found correct.

Glasgow District Asylum, Gartloch.

GLASGOW DISTRICT ASYLUM, GARTLOCH, *12th and 13th April* 1904.

There were on the register of the asylum on the 12th instant the names of 644 patients, in the proportion of 329 men and 315 women. All were in residence and were seen in the course of the visit. An opportunity of making any statement was given, of which a good many patients availed themselves.

The changes in the population of the asylum since last visit are as follows:—

	Pauper Patients.		
	M.	F.	TOTALS.
Admitted,	36	67	103
Discharged recovered,	10	22	32
Discharged unrecovered,	18	15	33
Died,	22	19	41

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There has thus been a decrease of 14 in the number of men and an increase of 11 in that of women. Of those discharged improved or unrecovered, 6 were boarded out in private dwellings in rural districts and 5 were sent to the care of relatives. It is understood that Dr. Parker has in view a considerable number of patients who can be similarly provided for, and it only remains for the parochial officials to find them suitable homes. The policy of discharging those who do not require further asylum treatment and of placing them under private care cannot be too highly commended, as the growth of the asylum population is thus controlled and a saving to the rate-payers is in many ways effected.

The deaths are registered as due to cerebral diseases in 10 cases, to general paralysis in 9 cases, to pneumonia in 5 cases, to cardiac disease in 4 cases, to phthisis pulmonalis in 3 cases, to tubercular disease, nephritis, and senile decay each in 2 cases, and to cancer, gangrene of feet, acute bronchitis, and cardiac failure from accidental confinement in heating chamber each in 1 case. In 37 instances, or in the very creditable proportion of 90 per cent. of the deaths, the above causes were verified by a *post mortem* examination. The results of these examinations are admirably recorded by Dr. Hannay, and good pathological work continues to be done in the laboratory.

No patient has been secluded or mechanically restrained since last visit. The Register of Accidents contains five entries—(1) a fracture of a rib due to a blow from a fellow-patient, (2) a fracture of a *humerus* from an accidental fall, (3) a dislocation at the shoulder-joint from slipping on kitchen floor, (4) death of a patient from secreting herself in the passage through which the hot air is driven into the drying chamber of the laundry, and (5) fractures of the two bones of the right forearm with laceration of the soft parts, sustained by a maid while attempting to arrange clothes in the wringing machine while in motion. Amputation of the injured parts was performed, a good recovery resulted, and the laundress is still in the service of the asylum. The opening of the hot air passage in the drying chamber is now protected with an additional iron screen, securely bolted, which will prevent the recurrence of such an accident as is described above. Three escapes have occurred, of which two are permanent.

The changes among the staff have been as follows :—2 attendants and 16 nurses have resigned, and 6 attendants and 29 nurses have been engaged. There have been no dismissals. Nurses taken on probation are now entered on the register, and this accounts for the apparently large number of changes among them. For day duty there are 28 attendants and 13 nurses in the male and 44 nurses in the female division. These numbers give a ratio of 1 to 8, which indicates a staff adequate to meet the liberal amount of leave of absence granted—in other words, it secures that the wards are not at any time understaffed. For night duty there are 7 attendants and 16 nurses, 5 of the latter being in charge of male dormitories. It is recorded with satisfaction that the male patients in the sick and senile wards and in the sanatorium are both day and night under the care of nurses, who are supervised by the Matron and Assistant Matrons. This is a great and important advance in the care of the male insane, as it guarantees them kindly and sympathetic treatment. The teaching and training of the staff is carried on in a systematic and thorough manner, and 12 members of the present staff, and 8 others who have left the service of the asylum, have passed the Medico-Psychological Examination. Nine are to present themselves at the forthcoming examination. A scheme for the further training of nurses in the asylums and hospitals, under charge of the Parish Council, has been adopted, and a higher course of lectures is about to be given. Those who undergo the prescribed training and pass all the examinations are to be allowed to enter their names on the Local Government Board's register of Trained Sick Nurses.

The farm colony is now in occupation, 38 male patients being in residence. The accommodation in this building is of an excellent character and all that could be desired for quiet and working inmates. The combined dining hall and kitchen, the first in use of this design in Scotland, left a pleasing impression on account of its homelike appearance. The whole house has been substantially and comfortably furnished, and the dayrooms are enlivened by pictures and plants. A bagatelle board and other means of indoor amusements have been provided, The size and number of radiators seem

greater than are necessary, and entail a large consumpt of coal. It is understood that an outside iron staircase from the dormitories is to be erected so as to form an alternative exit in case of fire.

The farmhouse of Gartsheugh is occupied by 5 female patients, where their environments are of a thoroughly domestic description which they evidently enjoy.

Among the many improvements which have recently been effected are the widening of the verandahs adjoining the infirmary and senile wards, from 4 feet to 10 feet, so as to allow of beds being placed in them, extensions of the laundry comprising a large dispatch room, a clothes store and recess for store, and the erection of septic tanks for the purification of the sewage from the sanatorium and farm colony. The works now in progress are the building of a wing to the Nurses' Home to contain 26 bedrooms, structural alterations in sections of the hospital so as to form dormitories, single rooms, and lavatories for the accommodation of recent, excited, and noisy patients, and minor alterations in the asylum store and kitchen which will greatly facilitate the administration of these departments. It is understood that the erection of the large messroom in the kitchen court of the hospital is to be proceeded with almost immediately.

The general and medical management of the asylum continues to be characterised by energy and ability. The patients bore every evidence of satisfactory care, and were, with few exceptions, free from excitement. Their mental and bodily condition is fully investigated, and it was apparent that no method of treatment likely to be productive of good results is left untried. The dinners seen during the visit were abundant meals, and it was observed that they were popular with the patients. Industrial employment is found for 195 men and 133 women. The farm of Gartsheugh has recently been acquired, and the land now in possession of the asylum amounts to 442 acres. It is hoped that full advantage will be taken of this land in employing the male patients in farm labour. The number at present so employed is 39. It is, however, only fair to state that 65 men are engaged at work in the grounds, and that good progress is being made in levelling the base of the hollow below the Sanatorium and in laying out the grounds around the Nurses' Home, Sanatorium, and Farm Colony. The large number on parole, 90, is a praiseworthy feature in the management of the patients.

The asylum throughout was in excellent order, and the beds and bedding were in a satisfactory condition. Three of the asylum blocks have been repainted, and the fourth block and the hospital are soon to be similarly renovated. There is a deficiency in the accommodation for the medical and official staff, which would be relieved if the attendants were removed from the administrative block and provided for in a separate home.

The case-books are well and intelligently kept, and the official registers were found correct and written up to date.

GLASGOW DISTRICT ASYLUM, GARTLOCH,
10th and 11th November 1904.

The asylum was last visited on the 12th April of the present year. Since then the following changes have taken place :—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
On register 12th April 1904, . .	329	315	644
Admitted, ...	94	82	176
Discharged recovered, . . .	24	32	56
Discharged unrecovered, . .	29	29	58
Died, ...	16	14	30
On register at this date, . . .	354	322	676

One man was absent on statutory probation, and one man absent on pass. All the other patients were resident and were seen in the course of the visit.

The assigned causes of the 30 deaths are as follows :—General paralysis in 8 cases, bronchitis in 3 cases, epilepsy in 3 cases, heart disease in 3 cases, phthisis in 3 cases, senile decay in 3 cases, cancer in 2 cases, exhaustion from acute

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mania in 2 cases, and apoplexy, kidney disease, and ulcer of the œsophagus in 1 case each. *Post mortem* examinations were, with the usual attention to such matters in this asylum, performed in 26 instances, or in a proportion of over 80 per cent. of the deaths.

There are 16 entries in the Register of Restraint and Seclusion which refer to the partial restraint of one person for surgical reasons on 14 occasions, and to the seclusion of 1 person on account of violent excitement on two occasions.

There have been 11 escapes in the period covered by this report, and the patients were in each instance absent for at least one night before being brought back.

Of the entries in the Register of Accidents those which are of a more serious nature are as follows:—(1) Intra-capsular fracture of head of femur, (2) impacted fracture of head of femur, (3) fracture of clavicle, all in male patients, and (4) fracture of both bones of the right leg in a female patient. These occurrences were not followed by fatal consequences; they were the result of fortuitous circumstances and not directly attributable to the fault of those in charge of the patients. The book in which minor accidents, such as bruises and other marks of injury, are recorded contains, as usual, a number of entries, most of which are unimportant.

The Daily Register shows that at the time of the visit 342 patients—200 men and 142 women—were usefully employed. This gives a proportion of 56 per cent. of the men and 44 per cent. of the women. Excluding 80 men and 40 women who are returned as "assisting in household work," the record of employment is, especially for men, considerably below average. There are only 85 men returned as working on the farm and garden, a percentage of 24 of the resident male patients. No doubt the season of the year is unfavourable for outdoor work, and it has to be remembered that the constant boarding-out of able-bodied men, which is still going on, is depleting the available supply of workers. There is also an undoubted change in the type of the male patients admitted, an increasing number of whom are senile or infirm or afflicted with acute nervous diseases other than insanity. Work on the land is, however, the most beneficial form of exercise for male patients, and it is hoped that arrangements may be made for the regular employment of larger numbers of men upon the ample arable land now at the disposal of the institution.

The staff of attendants and nurses on day duty consists of 28 men and 50 women, which gives a proportion of 1 attendant to 9 patients. On night duty there are 26 attendants—9 men and 17 women. The disproportion of the sexes is due to the larger employment of female nurses in the hospital divisions of the asylum. The comparatively large numerical size of this staff, which ought to exercise a beneficial influence upon the patients, is due to the following reasons:—(1) The recent substitution by the District Board of a 9½ hours' day for attendants instead of the previous 14 hours' day—which, if the duties of the attendants were properly performed, was undoubtedly too long; (2) the need for a larger nursing staff for the care of the bedridden, senile, sick, and infirm patients, who are now being sent to asylums in increasing numbers; and (3) the recent movement in the asylums of Great Britain, which has been fully adopted by the Glasgow asylums, for the night supervision of all troublesome, restless, or dangerous patients. The adoption of the last-mentioned advance in care and treatment was inevitable on the basis of the principle which has now for nearly 50 years directed the motives of those who are charged with the care of lunatics. Fortunately the system promises to lead to economy, for it has already proved that asylums may be constructed without the large number of single rooms, which formerly formed one of the distinctive and one of the most expensive features of their equipment. It is also more than probable that the type of chronic patient, which will result from the care and individual treatment which is implied in this increased day and night staff, will be less troublesome and more easily amenable to management than are a considerable proportion of those who are inmates of the ordinary wards of asylums at the present day.

The following changes have occurred in the resident staff, which numbers in all about 175 persons, since the asylum was last visited:—

	Officers.		Attendants.		Servants.		Totals.
	M.	F.	M.	F.	M.	F.	
Engaged, . .	2	1	11	19	...	25	58
Resigned, . .	1	2	6	24	...	22	55
Dismissed, . .	1	0	1	1	...	5	8

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The general condition of the asylum patients was satisfactory. A few of the women were, as usual, noisy and excited, but the great majority of the women and almost all the men were orderly and composed in their demeanour. The dress of the patients of both sexes was suitable and in good repair. The dinners provided on both days of the visit were examined and call for no comment. A dormitory on the first floor of B block, on the female side of the asylum, is to be utilised at once for the night supervision of feeble and aged women who require night supervision.

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The patients in the hospital, who are there for medical reasons, presented a good example of the benefits of efficient care and nursing. They were remarkably quiet and free from excitement. The new reception wards, one for men and the other for women, contain each 18 beds. The recently-admitted cases were all confined to bed, and showed no disposition to be restless or refractory. They included all kinds of acute mental affection, but the more prominent symptons were evidently greatly modified by the form of treatment and by the surroundings. The male admission ward is under the charge of male attendants. The only part of the hospital which is under the charge of men is the observation ward, where the patients are not confined to bed, but require active supervision. The senile wards, male and female, with 21 beds each; the sickrooms, male and female, with 30 beds each; and the female admission ward, with 18 beds, are under the exclusive charge of female nurses. At the time of the visit there were in all, including patients in the sanatorium for phthisis, 154 patients confined to bed. One special feature in treatment deserves notice. Several patients (about 6 of each sex) suffering from acute mental symptons were being treated by rest in bed in the open air. Their beds were placed in the verandah opening off the sick wards. The results are said to be encouraging and such as to justify a further extension of this mode of treatment.

The classification of the patients in the hospital, and the general arrangements for their treatment, are admirable and deserve the fullest recognition.

The efficiency of the laundry has been increased by the addition of a new room for sorting and issuing clothes, and by enlarging the space of the ironing-room. The extension of the Nurses' Home is making satisfactory progress.

The books and registers were examined and found correct.

Glasgow District Asylum, Woodilee.

Glasgow District Asylum, Woodilee, 14*th*, 15*th*, *and* 16*th April* 1904.

There were on the 14th instant 885 patients on the register of the asylum. Of these, 476 were men and 409 were women. Two men were absent on pass. The vacancies for patients are estimated at 31 in the male and 58 in the female division, but there are at present 68 patients' beds occupied by members of the staff, 34 of which will be vacated when the Nurses' Home is completed.

The following statement shows the changes in the population since last visit:—

	Pauper Patients.		
	M.	F.	totals.
Admitted, ...	74	44	118
Discharged recovered, .	13	24	37
Discharged unrecovered, .	13	17	30
Died, ...	20	9	29

The males have increased by 28 and the females have decreased by 6. For two months of the period under review all male patients were sent to this asylum in order not to overcrowd the male division of the Gartloch Asylum. The high male admission rate is thus accounted for.

Of those discharged relieved or unrecovered, 18 were boarded out in private dwellings and 2 were sent to the care of relatives. Dr. Marr has given to the parochial officials a list of 30 patients whom he considers suitable for trial

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under domestic care. These facts are recorded with satisfaction, as the active discharge of unrecovered patients who have ceased to require asylum care is good for the patients and good for the asylum.

The causes of death were natural, and no diseases of a zymotic type have occurred since last visit. The deaths are registered as due to general paralysis in 5 cases, to acute pulmonary affections in 8 cases, to senile decay in 4 cases, to cardiac disease in 3 cases, to acute brain disease in 4 cases, to fibroid phthisis in 2 cases, and to intestinal obstruction, acute gastritis, and phthisis pulmonalis each in 1 case. That among the foregoing causes there has been only one death from consumption is a noteworthy fact. In 22 instances, or in 75·8 per cent. of the deaths, a *post mortem* examination was made, the results of which are fully recorded. It was abundantly evident that every opportunity of advancing the knowledge of insanity is taken advantage of by Dr. Marr and the assistant Medical Staff. The clinical study of every admission is most complete, and the attention given to pathological researches in this asylum merits the highest commendation. The new laboratory is making satisfactory progress, and, judging from its design, accommodation, and the sum allotted to its equipment, it will undoubtedly be the best of its kind in Scotland.

The Register of Restraint and Seclusion contains 11 entries. They refer to the seclusion of two patients on account of violent excitement and homicidal impulses. Three accidents are recorded—one was not of a serious character, and the other two involved fractures of ribs, sustained in one instance from a fall and in the other case from a blow from a fellow-patient. There has been only one escape in which the patient was absent overnight before being brought back.

The changes among the members of the nursing staff have been 18 resignations, 19 engagements, and 3 dismissals. The causes of these dismissals were insubordination, striking a patient, and absence without leave. Both the day and night staff are maintained at adequate strength, and the large number of nurses on duty on the male side is attended with advantages and benefits which are becoming more and more recognised by the best asylum administrators. During the past year, 16 members of the staff have, as a result of the teaching and training they received from the Medical Officers, obtained the certificate of the Medico-Psychological Association for proficiency in mental nursing, and it is understood that 14 nurses and attendants are to present themselves at the forthcoming examination.

The Nurses' Home, which will have accommodation for 110 of the female staff, will, it is hoped, be ready for occupation by September. A block of 14 houses for married officials and attendants is almost completed, and every house has been applied for and allotted. It is understood that there are further applications from married attendants and artizans for house accommodation, which are under consideration.

Since the opening of the reception-house on 8th December 1903, 373 patients have been admitted to its wards, and of this number 130 have been discharged recovered without having to mix with patients in the main asylum. This has been done by using the lower wards of the sanatorium for convalescent patients, these wards not being at present required for those affected with tubercular disease. In this way those who are the subject of recent and acute attacks of insanity are given the best possible chance of recovery. Their environments and the nursing arrangements are in every way similar to those of a general hospital, and recovery is neither prevented nor hindered by the presence and conduct of chronic inmates. The reception-house and convalescent wards constitute a valuable and important advance in the treatment and classification of the patients.

The asylum continues to be administered by Dr. Marr in a progressive and enlightened manner. The patients in all sections of the institution were found well cared for, and with few exceptions their behaviour was orderly and quiet. General contentment prevailed; there were no complaints calling for investigation, and the appeals for discharge were not numerous. The clothing of both sexes was varied as to material, well fitting, and of good quality, and the personal tidiness of the inmates was creditable to those in immediate charge of them. The dinners seen during the three days of the visit were abundant, of which appreciation was voluntarily expressed by some of the more intelligent patients. Grace is sung, and the service of the meals

is both orderly and expeditious. Industrial employment is found for 345 men and 300 women, being 72 per cent. and 73 per cent. of the number resident. By the purchase of the farm of Easter Muckcroft and Barr the asylum estate now amounts to 751 acres. Asylum farms exist mainly for the purpose of employing as many patients as possible. The number engaged in agricultural work is at present 82, but at certain seasons it rises to 113, or 26 per cent. of the male inmates. This institution stands fifth among Scottish asylums as regards the percentage employed at farm work; the percentage of the other four asylums ranges from 36 to 47. The Brabazon class, consisting of 47 patients and a committee of 8 ladies, was seen at work. The success which has been attained in developing the capabilities of these patients in the various occupations is most gratifying. The pleasure and interest of the class in their work was abundantly evident, and of the usefulness and benefits of this scheme there can be no doubt.

The wards were throughout in excellent order, the dayrooms being very bright and comfortably furnished, the dormitories scrupulously clean, and the beds and bedding properly attended to. Repainting was in progress in certain sections, and the renovation is being tastefully done. Fire buckets, three or four in each ward, have been added to the fire-extinguishing appliances, and it is understood that outside iron staircases, as alternative exists, have been contracted for. It has been arranged that by telephoning to the Inspector of the Kirkintilloch Water Works the pressure can, in the event of a fire, be increased to the extent of 20 lbs., which is considered sufficient to raise the water to any part of the building. The septic tank and filter are nearing completion and will soon be in operation. Good progress is being made with the extensions of the farm buildings, the new piggeries being nearly finished.

The Medical Staff includes, besides Dr. Marr, three assistant Medical Officers, a Pathologist, and five Clinical Clerks. The case-books are admirably kept. The official registers were examined and found correct and written up to date.

GLASGOW DISTRICT ASYLUM, WOODILEE,
15th, 16th, and 17th November 1904.

The following figures show the changes which have taken place in the population of the asylum since last visit:—

	Pauper Patients.		
	M.	F.	TOTALS.
On register 14th April 1904, . .	476	409	885
Admitted, ...	87	90	177
Discharged recovered, . .	32	25	57
Discharged unrecovered, . .	26	19	45
Died, ...	22	16	38
On register at this date, . .	483	439	922

All the patients were resident and were seen in the course of the visit except 1 man, who escaped and had not returned.

Of the 45 patients discharged unrecovered 10 were boarded out with strangers and 7 were consigned to the care of relatives. The remainder are accounted for as follows:—18 were transferred to other institutions in Scotland, 3 were sent to Ireland and 1 to England, 3 were discharged on the expiry of the warrant which committed them to the asylum from prison during the currency of their sentence, 2 escaped and remained away for the statutory period of 28 days, and 1 was discharged on the expiry of the certificate of emergency.

The causes of the 38 deaths were verified by *post mortem* examination in 34 instances, or the creditable proportion of 90 per cent. The assigned causes of death are as follows:—Senile decay 8 cases, general paralysis 6 cases, tuberculosis and phthisis 5 cases, pneumonia 4 cases, disease of the urinary organs 3 cases, epilepsy 3 cases, heart disease 3 cases, gross disease of the brain 3 cases, and asthenia, scalding with hot water, and suicide by swallowing poison 1 case each.

The death from scalding occurred in the case of a boy who was an inmate of the villa for imbecile children in connection with the asylum. The injuries

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which resulted in death were received while he was being bathed, and were probably caused through the carelessness of one of the nurses in not thoroughly testing the temperature of the water during the process of bathing.

The case of suicide occurred as follows:—A nurse in one of the female hospital wards took from the poison cupboard in the ward a small quantity of carbolacene, which she mixed with water in a carafe, intending to use it in her bath. Her attention was directed to a patient who was restless and getting out of bed. She placed the carafe containing the carbolacene on the table and went to the patient's assistance. In the meantime a patient on the other side of the ward seized the carafe and drank its contents. Although the medical officers were at once summoned, and the patient's stomach washed out without unnecessary delay, she died soon afterwards.

Including the 2 deaths referred to, the Register of Accidents contains 7 entries. The only one of importance besides those mentioned above is an injury to the right foot, necessitating the amputation of the limb, in the case of a male patient. This patient was with others assisting in taking a railway waggon to the engine-house; he would appear to have slipped and fallen, and one of the wheels of the waggon passed over his foot.

There are 37 men and 11 women on duty as day attendants on the male side and 54 women on day duty on the female side. There are 8 men and 4 women on night duty on the male side and 11 women on night duty on the female side of the asylum. This gives a proportion of 1 day attendant to 9 patients and of 1 night attendant to 40 patients. When it is considered that these attendants both day and night are concentrated upon the care and nursing of the newly-admitted, the sick, the infirm, and the more troublesome patients, and that the proportion of attendants who watch over the quieter, chronic, able-bodied inmates has not been increased in recent years, it will be evident that this increase of attendants has for its purpose certain definite objects. These objects are briefly as follows:—(1) The better nursing of the sick and infirm insane so as to bring their care at least up to the standard which prevails in the larger poorhouse hospitals which accommodate ordinary sick paupers; (2) to promote the recovery of the newly-admitted patients where that is possible and to train those of them who are not destined to recover into habits of conduct which it is hoped will render them more amenable in the future to simpler methods of care than those which have hitherto been found practicable; (3) to cheapen asylum construction by doing away with the elaborate and expensive system of cells and single rooms which up to the present time had been believed necessary for the custody and safety of the patients. The resolution of the Glasgow District Board to shorten the hours of duty of their attendants from 14 to 9½ hours per diem has necessarily had the effect of increasing the staff of attendants, but it is earnestly hoped that this provision in the interests of the attendants may not have the effect of suggesting any curtailment of the rights which the insane have always had liberally accorded to them by the community.

The following changes in the staff have occurred in the interval covered by this report:—

	Officers.		Attendants.		Servants.		Totals.
	M.	F.	M.	F.	M.	F.	
Engaged, . .	0	0	13	12	0	7	32
Resigned, . .	0	0	11	12	0	5	28
Dismissed, . .	0	0	2	2	0	0	4

The Register of Restraint and Seclusion contains 11 entries referring to the seclusion of 1 person on one occasion and of 1 person on ten occasions. The reason for the use of seclusion was excitement with violent conduct. Since last visit 16 patients escaped and were absent for at least one night before being brought back.

Four hundred and seventy-two patients attended Divine service last Sunday in the asylum chapel.

The Daily Register shows that 636, or 68 per cent. of the population, were industrially employed at the time of the visit. No less than 247 men were working as garden or field labourers, which is slightly more than 50 per cent. of all the male inmates. This is a thoroughly satisfactory state of matters,

for of all employment which can be devised for male patients in asylums outdoor labour on the soil is the best. It promotes physical health and it allays restlessness and excitement, which are the most difficult and expensive symptoms to overcome in the care of the insane.

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As it was found that the Reception House, which only contained 20 beds (10 for each sex), was too small for the requirements of the asylum, and as, fortunately, the number of phthisical cases in the asylum has diminished, the Sanatorium for Consumption, which contains 60 beds (30 for each sex), has recently been used for the treatment of newly-admitted cases, and the patients suffering from tuberculosis are now treated in the smaller building. This arrangement has proved advantageous, for not only can the new cases remain for a longer time in hospital, but the larger building allows of a more extensive classification whereby the medical treatment is facilitated and the comfort and the rest of the quieter patients is rendered more secure. The arrangements for the reception, nursing, and medical treatment of newly-admitted cases in this asylum are now probably unsurpassed by those in any institution in this country. The facilities for the clinical investigation and the medical treatment of nervous diseases have been provided by the District Board with unstinted liberality. It is right to add that Dr. Marr and his large staff of assistants are sedulously observing facts and carefully recording them and that a mass of clinical material of great value is being gradually accumulated in the medical records of the asylum.

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The Nurses' Home is to be ready for occupation in a few days, but as the furniture is at present being taken in it was not possible to see the interior to the best advantage. It will provide accommodation for 110 nurses and other female officials who at present occupy rooms in the asylum, which will afterwards be at the disposal of patients. The exterior of the building is substantially but economically constructed without unnecessary ornamentation; the interior is comfortably fitted with modern appliances for ensuring sufficient light, heating, and ventilation; the main corridors and principal rooms are capacious and suitably furnished. The kitchen and dining-room arrangements are more elaborate than is usual in similar buildings, but it is understood that more extensive use is to be made of these adjuncts than is at present the case in other asylums.

The new laboratory has been completed and fitted up with elaborate appliances of every description for pathological research. It contains a waiting-room, a *post mortem* department with an adjacent microscopic and section cutting-room, a chemical-room, a lecture-room or library, and smaller rooms for private research. It is perhaps the most complete and best-equipped institution for nervous pathology in the United Kingdom.

When plans came before the General Board in 1902 showing a proposed laboratory for this asylum, the Board took exception to the costliness of the plan and to the elaborate character of the investigations which seemed to be contemplated, and on 28th October 1902 they wrote a letter on the subject to the District Board, in which, among other things, they pointed out—1st, "That for the prosecution of such investigations with hopeful results a permanent and highly-paid staff of pathologists of scientific bent and high attainments would be required; and, 2nd, that those engaged in such work would require to give their whole minds to it and to be relieved of the altogether different kind of work involved in the management of a large asylum."

The plans were eventually sanctioned upon a somewhat reduced scale after urgent representations in their favour had been made by the District Board. The building, however, even in its reduced form, is of such an elaborate character as to require that the District Board must still consider the question of providing an adequate scientific staff to be exclusively engaged in this special work. Otherwise there is the alternative to be faced that they have erected and equipped a costly scientific establishment which is confining itself to work which might easily be accomplished with much simpler and less costly means.

The management of the asylum under Dr. Marr continues to deserve the favourable reports which are embodied in previous entries. The care of the large number of patients which the institution contains is characterised by a wise appreciation of the requirements of the insane as a class and by, as far as that is possible, attention to the personal idiosyncrasies of each patient. The

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food, personal clothing, and general health of the patients were, on the whole, very satisfactory. The absence of noisy excitement among even the more mentally degenerate class of patients is an excellent sign of their care and treatment.

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The books and registers were examined and found correct.

Govan District Asylum, Hawkhead.

GOVAN DISTRICT ASYLUM,
5th and 6th April 1904.

On the 5th instant there were on the register of the asylum the names of 500 patients, in the proportion of 280 men and 220 women. Of these, 6 males and 5 females are private patients, and 274 males and 215 females are paupers. All were seen in the course of the visit except 2 females who were absent on pass.

The changes among the patients since 13th July 1903, one of the dates of the previous visit, are as follows :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted, - - -	2	3	105	75	185
Discharged recovered, -	1	1	43	36	81
Discharged unrecovered,	1	0	23	22	46
Died, - - - - -	1	0	23	25	49

There has thus been an increase of 15 in the number of male patients, and a decrease of 6 in that of the females. The number of males exceeds that of the females by 60, and the present male wards are overcrowded to the extent of 20 patients. Accommodation is being provided in the workshop block for 32 males and at the farm steading for 14. When these houses are in occupation there will be only 26 vacant beds. In view of the high admission rate of male patients and of the rapid increase in their number—34 in two years—this spare accommodation will only suffice to meet the requirements of the district for about a year or two. In these circumstances, further provision for males is evidently necessary, and as an extension will take a considerable time to build, it is hoped that the District Board will at once decide to erect an additional male block. The number of female patients shows at present a tendency to decrease, and there are 33 vacant beds in the female divisions and 9 in the Lunatic Wards of Govan Poorhouse.

The deaths have been somewhat numerous, but were all due to natural causes. They are registered as due to brain diseases in 13 cases, to general paralysis in 12 cases, to cardiac affections in 8 cases, to tubercular disease in 4 cases, to senile decay in 3 cases, to pneumonia in 2 cases, to gastro-enteritis in 2 cases, and to cancer, chronic rheumatism, Bright's disease, bronchitis, and delirium tremens, each in 1 case. In 26 instances, or in 52 per cent. of the deaths, a *post mortem* examination was made. The Pathological Journal in which the results of these examinations are recorded is carefully and intelligently kept. A room near the mortuary in which the body of a deceased patient can be seen by relatives has been painted and furnished so as to create a favourable impression as to the care and respect paid to the dead.

The Register of Restraint and Seclusion contains 16 entries. They refer to the restraint of 6 patients and to the seclusion of 5 patients on account of violent and dangerous excitement. Two casualties are recorded; one was not of a serious character, and the other consisted of injuries inflicted by a male attendant on a patient. This case was reported to the Procurator-Fiscal, the attendant was tried, found guilty, and fined £5 or 21 days' imprisonment. There have been 2 escapes in which the patients were absent for at least one night before being brought back.

The changes in the staff have been more numerous than usual. Thirteen attendants and 10 nurses have resigned, 4 attendants and 1 nurse have been dismissed, and 15 attendants and 14 nurses have been engaged. The dismissals were due to ill-usage of a patient, intemperance, and insubordination. Eleven members of the staff passed at the last examination of the Medico-Psychological Association and obtained the certificate for proficiency in mental nursing. The provision of cottages for married attendants should be

kept steadily in view, as it is a sure means of increasing the stability and quality of the male staff.

Commissioners' Entries.

A favourable report can be given of the general condition in which the patients were found. With few exceptions they were quiet and well behaved, and general contentment seemed to prevail. From a few there were allegations of undue detention, but, on interviewing them privately, they revealed their insanity and their unfitness for discharge. One patient made charges of ill-usage against the attendants, which were investigated and found unsupported by the evidence of an intelligent inmate of the ward and by that of the medical staff, who frequently enquired into his statements. The clothing of both sexes was in good repair, and that of the females was varied in material, well fitting, and tasteful in appearance. The dinners seen during the visit were substantial, palatable, and much appreciated meals : on one of the days milk was given as a beverage. The quiet and orderly manner in which the dinners were served merits commendation. There are 189 men and 144 women registered as daily engaged in useful work. The land in possession of the asylum now amounts to 340 acres, and it is hoped full advantage of it will be taken by employing the male patients in farm work. In the hospital section were 29 men and 22 women confined to bed and under medical treatment. The excellent arrangements for the care of the sick in this section always attract favourable notice. There are 35 men and 19 women who are epileptic, 27 men and 1 woman are general paralytics, 12 men and 6 women who are the subjects of consumption in its various stages, and 10 men and 3 women are deemed to be actively suicidal. Eighty-seven men and 50 women attended Divine service last Sunday. The number who attend Mass is 12 men and 13 women.

Royal and District Asylums.

Govan District Asylum, Hawkhead.

The wards in the female division of the main asylum have been tastefully repainted and their appearance made cleaner, brighter, and more cheerful. It is understood that a similar renovation is to be effected in the male wards and in the hospital. The condition of the acute wards in the hospital section is most unsatisfactory ; they are dirty, they should be more fully and more comfortably furnished, and they should be supplied with pictures and other objects calculated to interest the patients. The equipment of the laundry has been greatly improved ; among the most important are an additional washing machine, a new wringer, and a Musgrave fan adapted to the drying closets, by which three times the drying power has been obtained. A new bleaching green has been laid out. The bank to the south of the main building has been put in order ; it is to be planted with shrubs and protected with a wooden fence. The grounds to the south of the hospital are, it is understood, to be laid out this year and made suitable for the exercise and open-air treatment of the hospital inmates.

Plans for providing alternative exits from the upper storeys of the blocks of the main building are being prepared by the architect, and are to be submitted to the General Board. It was noted with approval that fire buckets have been supplied to the various wards—in the first moments of a fire they are of great service, and anyone can handle them.

The registers and books were examined and found regularly and correctly kept.

GOVAN DISTRICT ASYLUM,
17th and 18th August 1904.

The asylum was last visited on the 5th April of the present year. Since then the following changes have taken place :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
On register 5th April 1904,	6	5	274	215	500
Admitted, . . .	0	2	74	58	134
Discharged recovered, .	0	1	29	23	53
Discharged unrecovered, .	0	0	21	12	33
Died, ...	0	0	17	17	34
On register at this date, .	6	6	281	221	514

Six women were absent on pass preparatory to being discharged from the asylum. With these exceptions all the patients were resident and were

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seen in the course of the visit. The prominent feature in the foregoing statistics is the large movement of the population which has occurred within a period of less than five months. Notwithstanding the high admission-rate, the numbers on the register are only 14 higher than at last visit. This is due to the large number discharged recovered and also to the comparatively large number who have been removed from the asylum though unrecovered.

The following statement shows the method in which those discharged unrecovered were disposed of :—

	M.	F.	TOTAL.
Transferred to other asylums, . . .	7	2	9
Transferred to Lunatic Wards of Poorhouse, Merryflats, ...	1	7	8
Boarded out with relatives, . . .	2	2	4
Boarded out with strangers, . . .	11	1	12
	21	12	33

From this statement it appears that 14 men and 10 women, who no longer required the more elaborate system of care which is provided in asylums, have been removed to simpler surroundings and to less expensive forms of care. It is gratifying to observe that the asylum authorities have been able to board out so many patients. In Scotland the boarding-out system has hitherto helped to relieve the pressure upon asylum accommodation, and it has often postponed the necessity of adding to asylums. In the present state of the accommodation of this asylum it is particularly necessary that steps should be taken to board out as many as possible of those patients who are harmless and who have ceased to derive benefit from residence in an asylum.

The asylum accommodation has just been extended by the opening of a residence for 32 male patients in the workshop block. This accommodation consists of a large day-room and two dormitories. The day-room is on the first floor and the dormitories on the second floor. The day-room is commodious and suitably furnished with tables, chairs, and a small billiard table. A number of easy chairs are about to be supplied, which will add to the comfort of the inmates and to the appearance of the room. The walls are bare and might be improved by hanging up a few pictures. The dormitories are said to require more ventilation, for, although the floor space is ample for the numbers occupying them, the cubic space is somewhat curtailed by the sloping character of the ceilings. This defect is to be remedied by placing ventilators on the roof. The sanitary appliances are limited to two water-closet seats, but it is understood that an additional closet is to be provided in the court-yard. It may be suggested that for the class of more intelligent patients who must of necessity be selected for occupying this accommodation an abundant supply of various kinds of literature should be provided.

The asylum provides nominal accommodation for about 540 patients—287 men and 253 women. The farm cottages, which are being repaired and partially reconstructed, will, it is expected, be ready about the end of next month and will accommodate 20 additional men. It may be estimated therefore that on the 1st of October of the present year there will be about 20 spare beds on the male side and about 30 on the female side of the institution. Considering the high admission-rate, especially of male patients, it is evident that for the requirements of a large and increasing urban district this margin of spare accommodation cannot for long be sufficient. It is therefore advisable to discuss beforehand what are the most suitable forms of extension both as regards the requirements of the institution itself and the experience of other asylums. The present hospital was at the date of the visit full on the male side, and with regard to the female wards it may be said that the margin of spare accommodation in them was not more than sufficient to meet the various emergencies of a large institution. So far, then, as the hospital is concerned, it is evident that any substantial increase in the population of the asylum would require additional hospital accommodation. Dr. Watson's proposal to erect infirm wards in connection with the main building is probably the correct solution if it is the case that the difficulties of adding satisfactorily to the present hospital are too great to be easily overcome.

The erection of villas for quiet, healthy patients has in many asylums been found to be a cheap form of extension, while experience has shown that life in these villas is more agreeable to certain classes of the insane than it is in the ordinary wards of large asylums. Appendix B. — Commissioners' Entries.

There are 13 entries in the Register of Restraint and Seclusion. These entries refer to the restraint by means of a strait-jacket or polka of 5 patients on account of violent excitement and the seclusion of 1 patient for the same cause. Royal and District Asylums.

There are no entries in the Register of Accidents. The Register of Minor Accidents contains a record of small marks, bruises, &c., which from time to time occur in the institution. Govan District Asylum, Hawkhead.

The deaths are registered as due to gross disease of the brain and nervous system 6 cases, heart disease 6 cases, phthisis 6 cases, general paralysis 5 cases, senile decay 2 cases, septicæmia 2 cases, and 1 death was due to each of the following diseases, viz. :—puerperal fever, pneumonia, pleurisy, alcoholic poisoning, acute mania, epilepsy, and Addison's disease. *Post mortem* examinations were only made, it appears, in 13 instances. This is an unusually small number for this institution.

The changes among the attendants have been as follows :—9 men and 3 women were engaged, 9 men and 3 women resigned, and 1 man and 1 woman were dismissed.

The condition in which the patients was found was in all respects satisfactory. The dinners on the days of the visit were suitably-cooked meals; the food was of excellent quality and an ample quantity was distributed to the patients.

The interior of the institution was found in some confusion owing to the necessity which has arisen for replacing the lath and plaster throughout large portions of the buildings. It is understood that the original workmanship was in this particular inferior.

The whole outside wood-work of the asylum buildings is being repainted; this work is being done under contract. The interior of the buildings is being repainted by workmen in the employment of the asylum, assisted by patients.

The books and registers were examined and found correct.

HADDINGTON DISTRICT ASYLUM,
3rd March 1904. Haddington District Asylum.

The following changes have taken place in the population of the asylum since last visit :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On Register 14th October 1903,	5	10	63	81	159
Admitted, - - - -	0	0	7	6	13
Discharged recovered, - -	0	0	0	3	3
Discharged unrecovered, -	0	0	2	2	4
Died, - - - - -	1	0	2	3	6
On Register at this date, -	4	10	66	79	159

While the total number of patients resident has not increased in the interval covered by this report, there has been a slight alteration in the relative numbers of the two sexes. In accordance with the standard of accommodation laid down in the preceding entry, there are 14 men and 9 women resident in excess of the proper dayroom accommodation, and 3 men and 4 women in excess of the sleeping accommodation. It is understood that, in response to a request by the District Board several of the Parish Councils of the district sent representatives to the asylum with the object of selecting suitable patients for boarding out. As no patients have in consequence been withdrawn from the asylum it may be assumed that relief is not to be looked for in this way. About 19 per cent. of the pauper lunatics in Scotland are treated in private dwellings, while only 8 per cent. of patients chargeable to parishes in the county of Haddington are so disposed of; in the similar lunacy districts of Banff and Elgin the proportion of pauper lunatics living outside the asylums is 27 per cent. and 20 per cent. respec-

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tively. The result of the recent endeavour to board out patients is, therefore, disappointing. There only remains to be considered the means of extending the asylum, and it is understood that this question is to come almost immediately under the consideration of the District Board. It would be advisable before coming to a definite decision as to the form of extension that the District Board should make themselves acquainted with the economical method of villa extensions which has been adopted in several Scottish asylums, and especially at the Banff Asylum, which in size and many other respects resembles their own institution.

The deaths are registered as due to heart disease in 2 cases, and to pneumonia, general tuberculosis, cancer of the stomach, and general paralysis in 1 case each. *Post mortem* examinations were made in all instances except one in which the permission of the friends was refused. This, taken in conjunction with the careful manner in which the *post mortem* records and case books are kept, is highly creditable to the medical supervision of the asylum. The instruction of the nurses and attendants by means of lectures and demonstrations is being regularly carried on by Dr. Ronaldson and Dr. Grant.

There are no entries in the Register of Accidents or in the Register of Restraint and Seclusion. No patient has escaped since last visit.

One hundred and forty-eight patients were industrially employed at the time of the visit. Of that number 28 men were working on the farm and garden, 15 women were working in the kitchen and laundry, and 36 women were sewing or knitting. The remaining number was employed at various trades and household work.

The changes in the nursing staff have been as follows :—4 women resigned, 1 woman was dismissed for disobedience, and 3 women were engaged.

The dress of the patients, especially that of the females, attracted favourable attention. There was, with one or two exceptions, no excitement among the patients, who presented every appearance of receiving conscientious care and proper supervision in all that concerns their welfare. The dinner to-day consisted of broth with bread, and meat with excellent potatoes. One half of the patients got cold tinned meat and the other half hot stewed meat. It was learned that when the same dinner is again served the distribution of hot and cold meat is reversed. In this way variety is obtained.

It was pointed out in the previous entry that there is no baking oven in the asylum kitchen. This is a serious drawback, for it limits the variety of the cooking to boiled meats and prevents the preparation in summer of fruit tarts and similar dishes which are commonly given in other asylums.

The asylum was throughout in a state of admirable order and cleanliness. If any exception could be taken it would be to the two large male dayrooms, which suffer not from want of care but from overcrowding.

The books and registers were examined and found correct.

HADDINGTON DISTRICT ASYLUM,
21*st October* 1904.

There are at this date 164 patients on the register of the asylum. Of these, 3 males and 9 females are private patients, and 70 males and 82 females are paupers. Effect has been given in the above figures to the transference of 1 female from the private to the pauper list. All the patients were seen except 1 male, who is absent on pass.

Since the last visit, on 3rd March 1904, the following changes have taken place :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Admitted, ...	1	0	11	8	20
Discharged recovered, . .	0	0	3	4	7
Discharged unrecovered, .	1	0	0	2	3
Died, ...	1	0	4	0	5

The result of these changes is an increase of 5 in the number resident. Efforts have been made by Dr. Charles Macpherson, Deputy Commissioner, to induce Inspectors of Poor to board-out certain patients in private

dwellings, but as yet without success. It is to be regretted that in regard to the majority of Parish Councils there is an entire lack of co-operation in this movement, and consequently the prospect of any reduction in the asylum population being effected by the discharge of incurable and inoffensive patients is unfortunately very small. In these circumstances an extension of the asylum is the only alternative, and in view of the overcrowded condition of the wards no time should be lost in providing additional accommodation. The air in the male dayrooms was at this date close and heavy, and in the evenings it must be unwholesome. The suggestion contained in the previous entry as to erecting detached buildings is worthy of consideration. Villa extensions constitute a development in asylum construction of an important character, and embody views which have long influenced the care and treatment of the insane in Scotland.

The deaths are registered as due to heart disease in 2 cases, and to general paralysis, apoplexy, and consumption in 1 case each. In 4 instances, or in 80 per cent. of the deaths, a *post mortem* examination was made.

The Register of Restraint and Seclusion contains no entries. There have been no accidents. One patient escaped and was absent for a night before being brought back.

The changes in the staff have been more numerous than is desirable—3 attendants and 5 nurses have resigned, 5 attendants and 1 nurse have been dismissed, and 8 attendants and 6 nurses have been engaged. The causes for dismissal were intemperance and disorderly conduct in the cases of 3 attendants, and inefficiency and breaches of rules in the cases of 2 attendants and 1 nurse. It is recommended that the farm-house be utilised as accommodation for married attendants. Nothing conduces so much to securing and retaining the services of trustworthy attendants as providing them with suitable and convenient homes. A tailor attendant has been added to the staff.

The employment of the patients in useful work receives every attention. The percentage of men engaged in agricultural work is higher than that in any Scottish asylum—a fact which is creditable to the present management. The importance of the abundance of outdoor work which the farm affords cannot be over-estimated. Such labour interests the patients, improves their bodily health, and renders them more contented, besides being a source of considerable profit to the asylum.

Except for the overcrowding, a favourable report can be given of the condition of the patients. They are all well and neatly clothed, had every appearance of being well fed and cared for, and were free of complaints except those which were the outcome of delusive ideas. Two men and 6 women were confined to bed, and it is recorded with approval that the care of the men who are sick is entrusted to a nurse. The dinner at this date was a well-cooked and abundant meal, of which appreciation was freely expressed. The dining-hall is far too small for the present population, and this necessitates having two services of every meal, which entails much waste of time and administrative difficulties. Mess-rooms for the staff are much required.

The asylum is maintained in the best of order, and was throughout scrupulously clean. The beds were examined and the bed-coverings found ample for the season. It is understood that additional beds have been procured for the female dormitories, but it should be kept in mind that there are already six beds in excess of the sleeping accommodation. The whole of the outside woodwork has been repainted. Some of the passages on the dormitory floor require a similar renovation.

The books and registers were examined and found regularly and correctly kept.

INVERNESS DISTRICT ASYLUM,
2nd and 3rd February 1904.

The following statement shows the numbers resident at this and the previous visit, and the changes which have taken place in the interval :—

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	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On Register 8th July 1903,	5	3	331	312	651
Admitted, . . .	3	4	47	46	100
Discharged recovered, .	0	1	21	25	47
Discharged unrecovered, .	2	0	9	3	14
Died, ...	0	1	12	7	20
On Register at this date, .	6	5	336	323	670

With the exception of 12 men and 13 women who were absent on probation, all the patients were resident, and were seen in the course of the visit. The 25 patients referred to are out on probation with the object of testing their fitness for remaining in private dwellings. For the past few years Dr. Keay has strenuously endeavoured to diminish the accumulation of the inmates of the asylum by removing to private houses all those patients who, though not technically recovered, do not require the elaborate and expensive care of a modern asylum. In this way the increase of the population has been materially checked. It is to be regretted that some of the parishes in the district do not more actively co-operate in this movement, for there are still many patients in the asylum who could with advantage to themselves be removed to private care. The high admission rate makes it necessary that the efforts to remove chronic harmless lunatics should be as vigorously pursued in the future as it has been in the past. Kinmylies House, which has been recently purchased by the District Board, is occupied by about 20 male patients and 2 attendants. This house is under the charge of a matron, and so far this arrangement has given satisfaction. It is understood that it is proposed to reconstruct the outhouses immediately adjoining the mansion-house, so that 70 male patients may be ultimately accommodated there. If this rearrangement can be carried out at a moderate cost, as it no doubt will be, the District Board will find in this fact alone a justification for the purchase of the Kinmylies estate. The quality and quantity of the farm produce, and especially of the milk, supplied to the asylum from the new farm has already improved the dietary of the patients, and, it is believed, at no increased cost.

The deaths are registered as due to phthisis in 7 cases, to general paralysis in 4 cases, to gross disease of the brain and spinal cord in 3 cases, to exhaustion from acute mental disease in 3 cases, to cancer in 1 case, to epilepsy in 1 case, and to shock and septicæmia, the result of a scalding accident, in 1 case. *Post mortem* examinations were made in 17 instances. The results of these examinations are accurately recorded in a book kept for the purpose.

There are 8 entries in the Register of Restraint and Seclusion referring to the seclusion of three patients on account of extreme excitement. Twelve patients escaped since last visit, and were each absent for at least one night before being brought back.

The number of patients attending Divine service last Sunday was 330. The record of the employment of patients shows that at the time of the visit 288 men and 243 women were working. Of that number 218 men were engaged in manual labour on the farm and grounds, while 151 women were employed in the kitchen or laundry, or at sewing or knitting.

The Register of Accidents contains 7 entries, none of which, with one exception, were serious. This exception refers to the death of a male patient as the result of scalding by hot water. It appears that this man, who had been newly admitted in a state of acute excitement, was brought into the bathroom in charge of an attendant where another attendant was preparing the bath by running in hot water so as to bring it to the required temperature. The patient suddenly broke away from the attendant who was holding him, and, jumping into the bath, placed his head under the stream of hot water. He died in the course of a few days thereafter. The Procurator-Fiscal, who investigated the circumstances, and Dr. Keay, who was in a good position to judge of them, are both evidently of opinion that blame does not attach to the attendants.

The following changes have occurred in the nursing staff since last visit. Six men and 16 women have resigned, 5 men and 1 woman have been dismissed, and 14 men and 17 women have been engaged.

The condition of the patients was very satisfactory. The dress of the men was well fitting and in good repair, and that of the women was neat and varied in colour and design. The general health of the inmates was good. There was less excitement than on previous occasions; this was especially noticeable in the large dining hall, in which during the meal hours there was remarkable quietness, in contrast to its condition before the opening of the additional dining halls for the hospital blocks.

There were no complaints, and, with the exception of two male patients who considered themselves unjustly detained, there were no demands for release. The asylum was found throughout in excellent order.

Dr. Keay has resigned his position of Medical Superintendent, and is leaving in a few weeks to assume the management of the new Edinburgh District Asylum. Since Dr. Keay's appointment to the Inverness Asylum the institution has undergone many important changes. The erection of the hospitals has not only increased the accommodation, but has enabled the medical staff for the first time to deal advantageously with the large number of acute cases of mental affection, and with the increasingly large number of physically ill and broken-down cases, which are annually sent from a wide district for treatment. The opening of the hospitals and the initiation of hospital treatment implied not only a change from the old order to the new, but a corresponding increase of expenditure in other directions. The nursing staff had to be increased, and suitable accommodation provided for them; the heating and lighting of the asylum had to be rearranged, and other alterations and reconstructions had to be undertaken, all at a considerable outlay of money. The result has been to make the institution efficient in the light of modern requirements, which are essentially medical and as far as possible curative, and to bring it into line with other similar institutions throughout the country.

The books and registers were examined and found correct.

INVERNESS DISTRICT ASYLUM,
28th and 29th June 1904.

Since last visit Dr. Keay has left the service of the asylum, and Dr. R. B. Campbell, who was Senior Assistant Medical Officer in the Crichton Royal Asylum, Dumfries, has been appointed successor to Dr. Keay. The tribute paid in the previous report to the many improvements effected by Dr. Keay during his term of office, and to the high state of efficency in which he has left the asylum, is fully endorsed. Dr. Campbell, who is favourably known to the Board, will, it is fully expected, maintain the present high reputation of the asylum.

There were on the 28th instant 671 patients on the register of the asylum. Five males and 3 females are private patients, and 333 males and 330 females are paupers. Eleven males and 11 females are absent on statutory probation, and 1 male is absent by escape. The number resident is 648, all of whom were seen in the course of the visit.

Since 2nd February 1904, one of the dates of the previous report, the following changes in the population have taken place:—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted,	0	0	28	33	61
Discharged recovered,	0	1	17	16	34
Discharged unrecovered,	0	0	5	4	9
Died,	1	1	9	6	17

During the period embraced in this report the number on the register has only increased by 1, and the number resident by 3. Since 1st January 1900, 159 improved or unrecovered patients have been sent to the care of relatives or boarded out with guardians in rural districts, and of these, 22, or 13·8 per cent., have been re-admitted. This active discharge of unrecovered patients cannot be too highly commended. Though those suited for this method of provision may not be exhausted, yet it must be borne in mind that the residue yields a smaller percentage each year of improved patients who can with confidence be recommended for trial under domestic or private care. There

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appears to be no doubt that Dr. Campbell will, after he has had time to know thoroughly the mental condition of the patients, be able to continue this movement and prevent undue accumulation.

The rate of mortality continues low, and the asylum has been free of diseases of the zymotic class. The deaths are registered as due to heart disease in 5 cases, to phthisis pulmonalis in 4 cases, to pneumonia in 2 cases, to Bright's disease in 2 cases, and to uterine tumour, cerebral disease, cancer, and asthenia each in 1 case. In 16 instances, or in the creditable proportion of 94 per cent. of the deaths, a *post mortem* examination was made.

There has been no employment of mechanical restraint or seclusion in the treatment of the patients since last visit. One accident is recorded. A patient working in the shoemaker's shop became excited and, picking up a knife, assaulted the shoemaker-attendant, but was fortunately prevented from inflicting any serious wounds; two small cuts were the only result, and these healed without difficulty. Six escapes have occurred, in 5 of which the patients were absent over night before being brought back.

The changes in the staff are as follows:—9 attendants and 12 nurses have resigned, 1 attendant has been dismissed, and 10 attendants and 10 nurses have been engaged. These changes are numerous, but not exceptionally so in view of the change in the Superintendentship. The staff is maintained at an adequate strength, being 1 to 9 on the male and 1 to 10 on the female side. For night duty there are 5 attendants and 5 nurses. The arrangements for night nursing and supervision are very complete. There are 242 patients—115 males and 127 females, or 37 per cent. of the whole population—who are constantly under observation during the night. A night matron, who is a trained hospital nurse, visits at intervals both the male and female divisions of the asylum. On the morning of the 29th instant there was only one wet bed. There are 3 nurses in charge of the male sick ward, and it is understood that female nursing is to be extended on the male side. This advance in the care and treatment of the male insane is attended with the most beneficial results. As a result of the teaching and training of the junior staff last winter, 4 nurses and 1 attendant passed the examination of the Medico-Psychological Association held last May.

The patients were, on the whole, orderly in behaviour and bore every evidence of efficient care. They were neatly and tidily clothed, and their general health was satisfactory. Twelve men and 21 women were confined to bed, and it was evident that their treatment and nursing are of the highest standord. The dinners seen were much appreciated by the patients, the one at Kinmylies being specially popular. Full advantage is taken of the increased amount of land in possession of the asylum for the healthy outdoor employment of the men—87 being at this date engaged at farm work and 133 employed in the grounds and garden. It is a fact creditable to the management that the percentage of men employed in outdoor work at this institution is the highest among Scottish asylums.

The dayrooms are cheerful and comfortable in appearance, being liberally supplied with flowers, plants, pictures, and other objects of interest. All the dormitories on the second floor have been repainted and the wood-work revarnished. Those on the first floor are being similarly renovated. The floors of E and K wards are being laid with pitch pine, and their lavatories are being provided with modern sanitary fittings. The two hospital dining-rooms are now in use, and have afforded the much-needed relief to the main dining-hall. A mess-room for the male staff is completed and occupied. The new workshop block is an important addition to the resources of the asylum; it contains 12 workshops, all of which seem admirably adapted for their purpose. New teak sinks are about to be supplied to the kitchen to replace earthenware ones, which are worn out.

Plans for the reconstruction and extension of the outhouses at Kinmylies so as to afford additional accommodation for patients are about to be submitted to the General Board. A new water supply to Kinmylies is at present under the consideration of the District Board.

There appears to be a want of an adequate recreation-field. Outside games are necessary both for the patients and staff. The field to the north of the asylum would, if levelled in the centre, meet this requirement.

The appointment of a second Assistant Medical Officer is strongly recommended. The present medical staff remains at the same strength as when

the population of the asylum was less than half its present number. With the addition of Kinmylies the administrative work requires the greater part of the time of the Medical Superintendent, and consequently the medical care of the patients requires the services of an adequate assistant staff.

The registers were examined and found correctly and regularly kept.

KIRKLANDS ASYLUM, BOTHWELL,
28th January 1904.

There are in residence at this date 215 patients, 112 men and 103 women, all of whom were seen in the course of the visit.

Since 29th September 1903, the date of previous report, the following changes in the population of the asylum have taken place :—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
Admitted,	24	10	34
Discharged recovered,	5	3	8
Discharged unrecovered,	4	1	5
Died,	7	7	14

Of the 14 deaths, 4 are registered as due to general paralysis, 3 to brain disease, 3 to phthisis pulmonalis, and 1 to each of the following causes—pneumonia, enteritis, heart disease, and senile decay. In 8 instances, or in 57·1 per cent. of the deaths, a *post mortem* examination was made. The consent of relatives was unobtainable in the remaining cases.

There has, during the period under review, been no employment of mechanical restraint or of seclusion in the treatment of the patients. No accident has occurred. One patient escaped and was absent overnight before being brought back.

The changes in the staff are few, 2 attendants and 1 nurse have been dismissed for being absent without leave, and the three vacancies have been filled up. The accommodation for the staff is now fully abreast of that provided in the best asylums in Scotland. It consists of 8 well-designed cottages for married attendants and artisans, a nurses' home containing 14 bedrooms and a large sitting-room, and a home for 8 male attendants, to which is attached a house for the head male attendant and his family. The two homes are replete with every convenience and comfortably furnished. The recreation-room in the attendants' home has been supplied with a billiard table and other indoor games, and the results are beneficial in many directions. In providing these separate and comfortable homes the Committee and Dr. Skeen have done all that is possible to prevent unnecessary changes and to secure a permanent and reliable staff. These are important objects, as the good care and happiness of the patients depend largely on the efficiency and humanity of the nurses and attendants.

During the visit the patients were quiet, well behaved, and in general contented. There were no complaints calling for comment. The condition of the inmates with respect to clothing and personal tidiness was highly satisfactory ; the suits of the men were of good quality, and the dresses of the women were varied as to material, well made, and tasteful in appearance. One man and 8 women were confined to bed. Otherwise the general health of the patients is good. The dinner was an abundant and popular meal, consisting of potato soup with meat in it, bread, pudding and syrup sauce. Nothing could have been more orderly than the manner in which the meal was served. This great orderliness plainly showed that the present management of the asylum is both able and painstaking. It is to be regretted that the smallness of the dining hall necessitates a considerable number of the patients having their meals in the wards. Industrial occupation is well attended to—64 men and 78 women are registered as daily engaged in useful work. Twenty-one men were seen delving in the 9-acre field leased by the asylum. This outdoor work is beneficial both mentally and bodily, and it is also remunerative to the institution.

The wards were found clean and bright, and the dayrooms are adequately furnished and decorated, and well supplied with pictures, plants, books, and papers. The beds and bedding were exposed, as is done weekly, with the

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object of airing them, and it was observed that the majority of the straw palliasses were worn out and in an unsatisfactory condition. It would be an improvement from a sanitary point of view if all these palliasses were condemned and wire mattresses substituted.

The fire brigade, on an alarm being given, turned out with commendable promptitude. The pressure was sufficient to raise the jets of water to the highest parts of the building. The means of extinguishing fire are now adequate; 5 fire-plugs have been provided within the asylum grounds at suitable sites around the institution. A fire-station has been erected and well equipped with ample hose, uprights, and nozzles. The brigade is regularly drilled. All sections of the asylum, except the male attic dormitory, have alternative exits in case of fire. It should be seen whether an alternative exit cannot be provided for this dormitory.

It has been arranged that the sewage of the asylum is to be conveyed to the sewer of the Fallside District. It will there be dealt with at the purification works of the Bothwell Drainage District.

Everything seen during the visit indicated careful and progressive administration.

The registers and books were examined and found to be kept with care and accuracy.

KIRKLANDS ASYLUM, BOTHWELL,
29*th July* 1904.

The asylum was last visited on the 28th January of this year. Since then the following changes have occurred :—

	PRIVATE AND PAUPER PATIENTS.		
	M.	F.	TOTALS.
On register 28th January 1904,	112	103	215
Admitted, ...	21	22	43
Discharged recovered, . .	10	7	17
Discharged unrecovered, .	4	4	8
Died,.	6	6	12
On register at this date, . .	113	108	221

With the exception of 1 man who was absent on pass, all the patients were resident and were seen in the course of the visit.

The causes of death are registered as follows :—Three persons died of gross disease of the brain, 3 of phthisis, 3 of pneumonia or congestion of the lungs, 2 of general paralysis, and 1 of heart disease. *Post mortem* examinations were made in 5 instances.

There is a slight increase in the number resident at this, as compared with the previous, visit. The admission rate is, however, so large in proportion to the number resident that it may be regarded as satisfactory that the increase is not greater.

The Register of Accidents contains 1 entry referring to a fracture of the elbow joint sustained by a female patient through accidently falling on the floor. The patient is progressing favourably.

The Register of Restraint and Seclusion contains 3 entries which refer to the use of mechanical restraint in the case of a male patient to prevent the removal of surgical dressings.

The following changes among the nurses and attendants have occurred since last visit :—3 women have resigned ; 1 man and 1 woman were dismissed, the former for misconduct, the latter for unsuitability ; and 1 man and 4 women have been engaged.

It is proposed to convert two rooms, one on each side of the asylum and situated near the dining-hall, into mess-rooms for the male and female attendants respectively. In this way the tables in the dining-hall at present used by attendants will be set free for the use of patients so that all the inmates, with the exception of those in the sick-room, will be able to have their meals in association in the dining-hall. The two homes—one for nurses and one for male attendants—which have been in occupation for the past ten months, have proved successful and in every respect advantageous. A detached home for unmarried male attendants is a novelty in Scottish asylum administration, and this is the first asylum in the country to possess one. It

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is therefore gratifying to be able to report that none of the drawbacks which it was naturally feared might attend the inauguration of such a venture have resulted. On the contrary, the bedrooms presented an appearance of tidiness and neatness which is not, as a rule, observed in similar apartments in other asylums; the whole house was beautifully clean and properly aired; there are provided such means of recreation as books and games of all kinds, including billiards, which have proved sufficiently attractive; the conduct of the men, so far as their connection with the home is concerned, has been irreproachable; and, finally, it was learned that they fully appreciate the restfulness and quiet of the house, which affords complete detachment from their ordinary daily duties. The home for female attendants is equally good, but as in several other asylums similar homes are provided for the female staff it is not necessary to dwell upon its obvious advantages.

It was learned with approval that the Joint-Committee have had plans prepared for improving the accommodation for male patients. The chief of these proposals are the provision of a general bathroom by reconstructing the present swimming bath; the conversion of the present shoeroom into dayroom accommodation; the provision of boot-rooms and lavatories for the two large male wards; and the introduction of a large end window, of dormer windows, and of a fire escape staircase in the upper-dormitory. These changes are required, and if properly carried out will add to the efficiency of the asylum. A water pipe provided with hydrants at suitable intervals has been laid outside round the whole of the asylum building. The fire-station is kept in proper order, and the members of the fire brigade are regularly called out for practice.

The dinner served to the patients to-day consisted of fresh herrings and potatoes, followed by a rice and milk pudding. As is usually the case in this asylum, the service of the food attracted favourable notice. The food itself, especially the fish, was of excellent quality, and there was no indication that it was not generally appreciated by the patients. The clothing of the men, even of those who were working outside, was of good quality and neatly fitting; that of the women was in every respect commendable.

The general health of the inmates was good; fourteen patients—3 men and 11 women—were confined to bed. The other inmates, apart from those occupying the infirmary wards, presented a healthy and, in many instances, a robust appearance.

The employment of the male patients in work of a useful kind is as completely carried out as the somewhat limited resources of the institution in respect to land will permit. Forty-one men were working in the garden and grounds, and, as a result of their labour, the grounds surrounding the asylum are in excellent order, and the garden and fields are cultivated to the limit of their capacity.

The books and registers were examined and found correct.

Lanark District Asylum, Hartwood, *20th and 21st May* 1904.

Lanark District Asylum, Hartwood.

On the 20th instant there were 890 patients on the register of the asylum. Of these, 33 males and 41 females are private patients, and 423 males and 393 females are paupers. In these figures effect has been given to the transference of 1 male and 1 female from the pauper to the private list. The asylum, by maintaining private patients at a low rate of board, gives relatives an opportunity of transferring their insane kinsfolk from the pauper to the private list; and the ratepayers are in this way relieved of a burden they need not bear. In five years the private patients have increased from 31 to 74, a fact which clearly indicates the requirements of the public for accommodation of private patients at low rates of board.

Of the 816 paupers resident, 658 are chargeable to parishes in the Lanark Lunacy District, 68 to Edinburgh, 80 to parishes in the Renfrew Lunacy District, and 10 to parishes of other districts. The paupers belonging to the Lanark District have increased by 10 since 3rd June 1903.

Since 7th December 1903, one of the dates of the previous report, the following changes in the population have taken place:—

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	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted, . . .	11	8	45	29	93
Discharged recovered, .	3	4	16	8	31
Discharged unrecovered,	2	1	3	2	8
Died, ...	1	0	18	20	39

There has been an increase of 15 patients during the period dealt with in this report. Of this increase, 8 are private patients and 7 are paupers. All the patients on the register, 890, were resident and individually seen in the course of the visit.

The deaths are registered as due to inflammatory chest affections in 16 cases, to heart disease in 7 cases, to general paralysis in 4 cases, to enteritis in 4 cases, to consumption and other tubercular affections in 3 cases, to Bright's disease in 2 cases, and to apoplexy, pernicious anæmia, and chorea of pregnancy each in 1 case. The high mortality from acute lung affections and enteritis was due to a severe epidemic of influenza during the winter months, the disease being complicated with bronchitis, pneumonia, and acute disorders of the digestive organs. In 36 instances, or in 92·3 per cent. of the deaths, a *post mortem* examination was made. The case-books and other medical records continue to be well and intelligently kept.

The Register of Restraint and Seclusion contains 20 entries. They refer to the use of restraint on 15 occasions in 1 case to prevent self-mutilation, and in another case for surgical reasons, and to the use of seclusion in the treatment of 4 patients for periods varying from 20 minutes to 8 hours. There has been only 1 casualty, a fracture of the neck of the femur from being pushed off a chair by a fellow-patient. One escape has occurred, in which the patient was absent for 13 days before being brought back.

The changes among the staff have been as follows :—13 nurses have resigned, 3 nurses have been dismissed, 3 attendants and 16 nurses have been engaged, and 1 attendant died. The dismissals were not for offences against the patients. A noteworthy feature in these changes is the fact that no male attendant has either resigned or been dismissed. The District Board have in a most liberal and commendable manner provided cottages for married attendants. Of the 45 whose duty is the care of the male inmates 32, or 71 per cent., are accommodated in suitable and comfortable houses, and consequently the results as to the duration of service are most satisfactory, as the following facts will show (the asylum has been opened for 9 years) :—8 attendants have served for over 8 years, 4 for over 6 years, 6 for over 4 years, 10 for over 3 years, and 5 for 2 years : in other words, 68 per cent. of the male staff can show a record of service of from 8 to 2 years. It will be clear that the privilege of having a separate and suitable house conduces to good conduct and to better attention to duty, and stability in a staff is undoubtedly in the best interests of the patients. Fourteen of the artizan staff are similarly provided for with results equally satisfactory. Thirty-two members of the staff are in possession of the certificate of the Medico-Psychological Association for proficiency in mental nursing, and during the winter lectures are given to the junior members, 12 of whom went forward at a recent examination. Prizes are also given to attendants and nurses for the best notes on the patients under their care.

This asylum stands second among Scottish asylums in regard to the percentage of male inmates employed in outdoor work on farm, garden, and grounds. Fifty-eight per cent. of the men are engaged in garden and field labour, a fact which is indicative of energetic and successful management. Nothing is so conducive to good bodily health, sound sleep, and contentment as regular outdoor employment. The grounds are kept in admirable order, and every year improvements in their condition are observed. The levelling of the recreation-field is making rapid progress, and, when completed, it will afford ample space for outdoor games, such as cricket and football, which are necessary for the well-being and recreation of both the patients and the staff. Full advantage is, it is understood, taken of the bowling green and the golf-course.

Everything seen in the course of the visit indicated careful and painstaking administration. The patients were, with few exceptions, quiet and well behaved, and no complaints were made which call for mention. The appeals

relative to undue detention were few, and in no instance from patients who were fit for discharge. The clothing of both sexes was of excellent quality, well-fitting, and neat in appearance, and the personal tidiness of the inmates was creditable to those in charge. The dinners seen were substantial and well-cooked meals, of which appreciation was freely expressed. The service of the dinners was excellent, grace is sung, all standing, and the food was placed before the patients in a neat and methodical manner. The dining-hall is adorned with flowers and plants, and altogether the arrangements as to the meals are of a pleasing character. There were 28 men and 32 women confined to bed, and, except those suffering from acute consumption, their treatment and nursing were highly efficient. It is understood with approval that the District Board have resolved to erect a sanatorium for 20 of each sex for the isolation and open-air treatment of phthisical patients. This addition to the resources of the asylum will bring it abreast of the best-equipped institutions for the care of the insane. The site of this building will require careful consideration.

All parts of the asylum were found well aired, scrupulously clean, and maintained in excellent order. A dayroom in each division has been converted into a dormitory containing 10 beds for the accommodation of newly-admitted patients, and of those who are unfit for treatment in the hospital wards.

Two messrooms, one for nurses and one for attendants, are in course of erection. The serving of meals to the staff in the main dining-hall and in the presence of patients is gradually being abandoned in other asylums. The privacy and comfort which these separate messrooms will afford cannot fail to increase contentment among the staff.

The new arrangements for indicating an outbreak of fire and its site were examined and found very complete.

The registers were found regularly and accurately kept.

LANARK DISTRICT ASYLUM, HARTWOOD,
8th and 9th November 1904.

The asylum was last visited on the 20th May of this year. Since then the following changes have occurred :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On register 20th May 1904, . .	35	41	421	393	890
Admitted, ...	10	8	34	54	106
Discharged recovered, . .	7	3	18	24	52
Discharged unrecovered, .	2	1	6	1	10
Died, ...	2	0	13	9	24
On register at this date, . .	34	45	418	413	910

In the above figures effect has been given to the transference since last visit of 2 male patients from the pauper to the private list.

With the exception of 2 women who were absent on pass, all the patients were resident and were seen in the course of the visit.

The deaths are registered as due to phthisis and tubercular affections in 7 cases, to general paralysis in 4 cases, to pneumonia and congestion of the lungs in 4 cases, to cerebral hæmorrhage in 2 cases, to heart disease in 2 cases, and to enteritis, acute delirium, exopthalmic goitre, empyema, and post-diptheritic paralysis in 1 case each. *Post mortem* examinations were made in all instances except 2 in which the consent of the relatives was withheld. This points to the fact that Dr. Kerr and his assistants spare themselves no trouble to obtain a more extended and more accurate knowledge of the diseases they are called upon to treat.

There were three entries in the Register of Accidents which refer to the fracture of the bones of the leg in a male patient caused by falling in an epileptic fit ; to the fracture of a rib in a male patient supposed to have been sustained prior to admission ; and to the fracture of the neck of the femur in an old woman who was pushed over by another patient. The entries in the book kept for recording minor accidents were not more numerous than might be expected.

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There are three entries in the Register of Restraint and Seclusion which refer to the seclusion of 2 persons for violent excitement.

The nursing staff, exclusive of head attendants, consists of 39 men and 49 women on day duty (7 of the latter are employed in the male wards) and of 8 men and 9 women on night duty, in all 105 persons. It is unusual to have to record—it need scarcely be added that it is recorded with much pleasure—that during the period covered by this report only 7 members of this staff—2 men and 5 women—left the service of the institution, and that the cause of leaving was voluntary resignation, for which in each case sufficient reason was assigned.

The record of the employment of patients shows that at the time of the visit 336 men and 296 women were engaged in useful work. Two hundred and forty-three men were working on the farm and garden, which number is 53 per cent. of the male patients in the asylum. There is no better or more beneficial occupation for the able-bodied inmates of asylums than agricultural employment, and it is gratifying to observe that in this asylum so large advantage is taken of the opportunities which the land attached to the institution affords for this purpose. During the past season about 250 acres of bog land have been drained and made fit for grazing. In time it is expected that this will become suitable for cultivation. The new recreation-field, about five acres in extent, has been levelled and is now being drained. Occupation is found for the female patients in the usual way in the laundry, kitchen, and various forms of indoor industries.

Extensive changes in the nursing and care of the newly-admitted and infirm patients were observed. A new dormitory for the reception and bed treatment of acute cases has been opened in the female hospital. It contains 18 beds, all of which except four were occupied by acute cases; the patients were remarkably quiet and made no attempt at the time of the visit to leave their beds. The adjoining sick-room dormitory contains 20 beds, which were occupied by 16 recently-admitted patients, who manifested the same freedom from excitement and restlessness. The nursing arrangements for the corresponding class of patients on the male side were equally satisfactory as when seen on the occasion of the previous visits. The principal advantages of this system of treating new and acute cases are that it secures the rest of the patient, that it renders supervision and control much easier, and that it enables the staff to individualise the treatment of each patient and thereby to acquire a more intimate knowledge of their bodily and mental symptoms.

The asylum was found throughout in admirable order, and all its apartments were scrupulously clean. The new mess-rooms for attendants and nurses are finished and are forthwith to be occupied. They have been economically constructed and are roofed with glass, their position, in proximity to the main dining-hall, and their size and form render them in every respect suitable for their purpose. A great deal of repainting of the corridors and of other various parts of the institution has been accomplished during the past season by tradesmen in the employment of the asylum assisted by patients.

The dinner served to the patients on both days of the visit and the evening meal on the second day were seen. The food and its service were as usual satisfactory. A special feature which deserves notice is that for the family tables, 18 in number, the tea at the evening meal was infused in large separate teapots instead of being infused in a general boiler or infuser, as is the custom in most asylums in this country. The difference in the flavour of the tea separately infused was so remarkable and its appreciation by the patients so great that the hope may be expressed that all the inmates may in time be supplied with tea prepared in this way. For some reason the tea which is infused in bulk for several hundred people is almost devoid of the distinctive aroma which renders it enjoyable, and as the luxuries provided for the inmates of asylums are, as a rule, very few, the slight additional expense and trouble of supplying well-infused tea should not be grudged. It is creditable to the authorities of this asylum that they have introduced this pleasing change in dietary of the patients. For the information of those interested it may be stated that the teapots are made of enamelled iron; they are capable of holding about 24 ordinary cups, and their cost is five shillings each.

The patients were, on the whole, free from excitement and orderly in their demeanour. They exhibited the healthy look which betokens an adequate dietary and a sufficiency of outdoor life.

The usual weekly dance which is held on Wednesday evenings was visited. It was attended by several hundred patients and by the majority of the staff. The music was wholly supplied by the asylum band. A good proportion of the patients took part in the dancing, which was orderly and well conducted, and it was evident that those of them who were spectators only thoroughly enjoyed the performance.

The plans of the new sanatorium for the isolation of persons suffering from phthisis are under consideration at present, and it is expected that before long a commencement will be made with its erection.

The books and registers were examined and found correct.

MIDLOTHIAN AND PEEBLES DISTRICT ASYLUM,
25th February 1904.

Since the asylum was last visited the following changes in the population have occurred :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On Register 29th August 1903,	21	34	144	131	330
Admitted, ...	9	14	16	22	61
Discharged recovered, . .	4	3	5	7	19
Discharged unrecovered, .	3	2	4	1	10
Died, ...	3	6	7	5	21
On Register at this date, .	20	37	144	140	341

One of the male private patients is a voluntary inmate.

With the exception of 1 male and 3 females, who are absent on statutory probation, all the patients were resident and were seen in the course of the visit.

There are no entries in the Register of Restraint and Seclusion.

Six patients escaped and were each absent for at least one night before being brought back.

Of the patients discharged unrecovered, 2 males and 2 females were sent to the care of relatives, and 5 males and 1 female to other institutions. The desirability of transferring suitable pauper patients to private dwellings was referred to in the preceding report and need only be repeated here. It is apparent that the pauper patients in the asylum are slowly increasing. In two years they have increased in number from 242 to 284, and, although probably half of this increase is due to the reception of about 20 boarders chargeable to the Edinburgh City Parish, the balance can only be accounted for by the accumulation of patients belonging to the district. If this increase is to continue either the private patients, who it is understood are a source of revenue, must be gradually removed, or the ordinary method in Scottish asylums of preventing accumulation by removing quiet, harmless cases to private care must be adopted.

One hundred and twenty-four patients, 54 men and 70 women, attended Divine service last Sunday.

There are three entries in the Register of Accidents, but they are not serious and do not require special notice. A record of minor accidents and bruises is kept, but not in a book that is easily referred to. It is recommended that a special book be obtained for this purpose, and that complaints of a reasonable kind made by patients should also be entered in it.

The deaths are registered as due to pneumonia or congestion of the lungs in 5 cases, to phthisis in 3 cases, to apoplexy in 2 cases, to general paralysis in 2 cases, to gangrene of the lungs in 2 cases, and to pernicious anæmia, chronic bronchitis, heart disease, peritonitis, senile decay, epilepsy, and empyema in one case each. *Post mortem* examinations were made in 14 instances; in the remaining 7, chiefly private patients, permission to hold such examinations was refused.

There are 16 male attendants on day duty, which gives a proportion of 1 attendant to 10 patients, and 16 female attendants on day duty, which gives a proportion of 1 to 11 patients. As there are at present 13 more female than male patients in the asylum an additional female attendant should be engaged. The changes in the nursing staff since last visit have

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been as follows :—6 men and 7 women have been engaged, 4 men and 6 women have resigned, and 2 men have been dismissed for misconduct.

In accordance with the recommendation in the preceding entry a steam hooter has been placed in position in the boiler-house in order to give an alarm in case of fire. There is, however, no means of communication such as telephones or electric signals between the various parts of the asylum and the boiler-house except an electric bell from the Superintendent's office. It is understood, however, that the District Board have this question at present under consideration. It was learned that the pressure of water to the asylum is interfered with by a water meter placed about midway between the asylum and the reservoir, and that to obtain the full pressure it is necessary to divert the water into a bye-path passing this meter. Unless there is some cogent reason for having the meter where it is one would naturally suppose that it should be situated at the asylum within reach of the fire brigade.

The condition in which the patients were found was in every respect satisfactory. They were as a whole remarkably quiet and contented. Their dress was neat, of suitable material, and in good repair. A very substantial dinner, consisting of broth, stewed meat, and potatoes, was given to-day. It was well cooked and appeared to be appreciated. A male patient complained of the potatoes, and it was thought with some reason. Too many of them were small and unfit for eating. Such potatoes should be retained at the farm and should not be sent to the asylum. An asylum farm exists for the benefit of the asylum, and only such products as are marketable in the ordinary sense of the word should be supplied to the institution for consumption.

It is understood that the District Board are to rectify immediately the state of the valves of the radiators which were complained of in the two preceding entries.

The asylum was found clean and in admirable order throughout. The corridors were bright and nicely decorated with plants, and the dayrooms and dormitories were pleasantly heated and properly ventilated.

The recreation of the patients is well looked after. During the winter months there is a dance once a fortnight on Thursday evenings, and every alternate Thursday there is either a concert or a "social" evening, or an entertainment of some kind. A magazine called "Moonbeams" has been started and is contributed to by many of the inmates and members of the staff.

A great improvement has been made in the dining hall by rearranging the tables and decorating them with plants. Not only do the rooms look brighter, but the service of the meals is facilitated, and it is found possible to seat more patients than formerly.

It is recorded with satisfaction that it has been found possible to reduce the maintenance rate to £28, and the present financial prosperity of the institution will no doubt permit of a further reduction.

The books and registers were examined and found correct.

MIDLOTHIAN AND PEEBLES DISTRICT ASYLUM,
30*th September* 1904.

There are at this date on the registers of the asylum 166 males and 181 females, making a total of 347 patients. Of these, 1 male is a voluntary boarder, 16 males and 38 females are private patients, and 149 males and 143 females are paupers. One female has since last visit been transferred from the private to the pauper list. The number resident is 335, all of whom were seen and afforded an opportunity of making any statement they desired.

The date of the previous visit was 25th February 1904, and the changes which have taken place in the interval between the visits are as follows :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted,	4	4	26	16	50
Discharged recovered,	0	0	7	8	15
Discharged unrecovered,	4	2	4	2	12
Died,	3	0	10	4	17

During the period dealt with in the report there has been a decrease of 3 in the number of private patients, and an increase of 8 in that of the paupers. It is recorded with satisfaction that efforts have been and are being made to discharge to care in private dwellings patients who have become quiet and inoffensive and who do not appear to require detention in a fully equipped asylum. Dr. Mitchell has drawn up a list of 32 patients of this class, and Dr. Charles Macpherson, Deputy Commissioner, has visited and interviewed the Inspectors of Poor of the parishes to which these patients are chargeable and discussed the provision which could be made for their care and guardianship. Among the discharged unrecovered are 3 who have been sent to the care of relatives, and there are 3 men and 5 women who have been sent out on a year's probation with a view of testing their fitness for domestic care before being finally discharged. This is a useful and economical procedure, as it admits of any patient who should prove unfit being brought back without the expense of medical certificates and Sheriff's Order. If Inspectors of Poor co-operate freely and efficiently in this movement, as they should do, the number of patients provided for in private dwellings will be further increased. The asylum has, according to present requirements as to floor space, accommodation for 170 males and 170 females. The number resident at this date is 162 males and 173 females ; the latter are 3 in excess of the proper number, and there is vacant accommodation to the extent of 8 beds in the male division.

The deaths are registered as due to phthisis pulmonalis in 5 cases, to general paralysis in 3 cases, to cardiac disease in 3 cases, to pneumonia in 3 cases, and to acute delirous mania, intestinal obstruction, and fracture of skull each in 1 case. In 15 instances, or in 88 per cent. of the deaths, *post mortem* examinations were made.

The pathological records and medical case books are very well kept.

There has been no employment of mechanical restraint or of seclusion in the treatment of the patients. Five casualties are recorded—2 were slight in character, 1 entailed a fracture of the skull caused by running in front of a passing train, whether with suicidal intent or not it is difficult to determine, 1 was an attempt at suicide by hanging which was attended by no serious consequences, and 1 consisted of several bruises the result of illusage by an attendant who absconded before the Procurator-Fiscal had time to investigate the matter. It is recommended that caution cards be instituted so as to individualise the responsibility of those in charge of suicidal patients. There have been 3 escapes, one of which was permanent.

Since last visit 7 attendants and 6 nurses have resigned, 1 attendant has absconded, and 10 attendants and 8 nurses have been engaged. The day staff is maintained at an adequate numerical strength, the proportion being 1 to 10, both in the male and female divisions. The arrangements for night nursing and supervision were inquired into and found satisfactory—there are 3 attendants and 3 nurses on night duty, and 110 patients sleep under continuous observation. Only 5, or 1·5 per cent., are reported as having wetted their beds last night. In regard to the duration of service of the 43 members of the staff whose duty is the care of the patients, 1 has served over 6 years, 4 over 3 years, 5 over 2 years, 13 over 1 year, and 20 under 1 year. Three of the staff went forward for the last Medico-Psychological examination and passed well. The introduction of female nursing into the male sick wards, which has been attended with successful and beneficial results in other asylums, is a matter worthy of consideration. It appears, however, that the present state of accommodation for nurses will not allow of any addition to the female staff

The occupation of the patients in work on the farm and garden has during the past summer received increased attention. Since May 65 men have been employed almost daily at stone-gathering on the farm, and 35 are regularly engaged at farm and garden work. The present high percentage (60·5) of men engaged in healthy outdoor employment is a praiseworthy feature in the management. There is a party of 10 women who work daily in the garden under the charge of a nurse who is experienced in outdoor work. A marked improvement in the state of the grounds and garden was observed.

Great tranquillity prevailed both among the male and female patients during the visit, and no complaint calling for mention was made. The clothing was neat and comfortable, that of the men especially attracted

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favourable notice. An excellent dinner, consisting of pea soup. baked or boiled fish, potatoes, and bread, was served in a very orderly manner. Appreciation of the meal was freely expressed. The general health of the asylum is on the whole good; 24 men and 27 women were confined to bed, a large proportion of whom were the subjects of either acute mental affection or the infirmities of old age. The nursing arrangements in the hospital wards are highly satisfactory.

The wards were throughout in good order and abundantly supplied with flowers, plants, and other objects of decoration. A large number of interesting pictures has recently been purchased. It is understood that a contract has been entered into for the repainting of certain sections of the asylum. The appointment of a painter-attendant is recommended; he could, with one or two patients trained to assist him, overtake all the repainting required and be fully and constantly employed. The presence of strange workmen in the wards which contracted work entails is undesirable in many ways. The bedding was in good condition, and the dormitories scrupulously clean and well aired.

It is understood that telephonic communication is about to be installed between the asylum and the caretaker's house at the reservoir, and its extension to the engine-house, hospital wards, and farm would be of great service in administration and in case of fire. Attention is drawn to what was said in the previous report as to the site of the water meter, as in case of fire much valuable time would be lost in going such a distance to the meter in order to divert the water so as to obtain full pressure.

The finances of the asylum are in such a satisfactory condition as to warrant the reduction of the pauper rate of board to £26 per annum.

The registers and books were examined and found regularly and accurately kept.

Montrose Royal Asylum.

MONTROSE ROYAL ASYLUM,
28th and 29th March 1904.

Since the asylum was last visited the following changes in population have occurred:—

	Private Patients.		Pauper Patients.		Totals.
I. Certificated patients—	M.	F.	M.	F.	
On Register 20th July 1903,	51	65	267	294	677
Admitted since,	8	21	25	40	94
Discharged recovered,	3	7	15	6	31
Discharged unrecovered,	4	5	3	9	21
Died,	1	1	15	16	33
On Register 28th March 1904,	51	73	259	303	686
II. Voluntary inmates—					
Resident at last visit,	2	1	—	—	3
Admitted since,	5	1	—	—	6
Left,	2	2	—	—	4
Resident at this date,	5	—	—	—	5

In the above figures effect has been given to the transference since last visit of two females from the private to the pauper list, and of one male from the pauper to the private list.

With the exception of one male patient, who was absent on statutory probation, all the patients were resident and were seen in the course of the visit. The private patients have increased by 10 and the pauper patients by 1 in the period covered by this report.

From the Register of Deaths it is ascertained that the causes which contributed to the deaths of 33 patients were as follows:—8 persons died of gross disease of the brain and nervous system, 8 of senile decay, 6 of diseases of the heart, 5 of general paralysis. 3 of phthisis, 1 of cancer, 1 of pneumonia, and one through being run over by a railway train. *Post mortem* examinations were made in 24 instances. The death on the railway line occurred in the case of a female patient admitted last November suffering

from melancholia. It appears that explicit warning was from the first given to those in charge of this woman regarding her possible suicidal tendencies.

Her behaviour, however, seems to have disarmed suspicion, and early in January of this year she was allowed to go to work in the laundry, Dr. Havelock again recommending strict observation. On the evening of the 15th of January she escaped from the laundry, and next morning her body was found on the railway line not far from the asylum. The facts seem to point to intentional suicide, and there is naturally the feeling that if this patient had not been sent to the laundry she might be still alive. On the other hand if she had reached that stage of convalesence at which manual labour might accelerate her recovery, the mere risk of a danger which it is generally possible to guard against should not stand in the way of remedial employment. The lesson which this fatality teaches us is that responsibility for the care of such cases, to be effective, must be individualised, and that individual members of the staff should be answerable for the supervision and safety of each patient who is known to be suicidal. If there is a reflection contained in the preceding remarks it is a general one for, with the exception of one asylum, such a system is not in force in any Scottish asylum.

There is only one entry in the Register of Restraint and Seclusion, which refers to the restraint of one patient on one occasion for surgical reasons.

The number of patients attending Divine service last Sunday was 343, which is a very fair proportion.

The register of the engagement and leaving of attendants and servants shows that 7 men and 8 women resigned; that 4 men were dismissed (2 for absenting themselves without leave, 1 for intemperance, and one for unsuitability); and that 11 men and 8 women were engaged.

The general health of the patients was on the whole very satisfactory. Eleven men and 32 women were confined to bed for various causes. The proportion of men in bed is smaller than is usually found in modern asylums of this size and suggests the need for an extension of the hospital treatment of acute and recent cases, to which reference has been frequently made in previous entries. It is understood, however, that Dr. Havelock has in view the desirability of introducing female nursing into the hospital division of the male side, which is a step in the direction indicated. There was a conspicuous absence of noisy excitement in all parts of the asylum, and complaints, which were rare, referred for the most part to the subject of unnecessary detention. In only one case, that of a lady patient, was there any doubt as to the necessity for the confinement of those so complaining in an asylum. The dress of the female patients in the main asylum and hospital was without exception commendably neat, and varied in colour and design. The asylum throughout was found clean, well ventilated, and in excellent order.

The new Female Villa is completed, and only requires furnishing to be ready for occupation. Externally it is ornately and substantially built, and internally it promises to afford comfortable and commodious accommodation.

The fire-extinguishing arrangements in connection with the institution have recently been re-organised. A new fire station has been erected; a force pump has been provided to increase the pressure of water; a steam syren has been attached to the boilers; the water supply to the asylum has been doubled; and the hydrants around the buildings have been increased in number. A new set of rules for the instruction of attendants and the regulation of the Fire Brigade has been drawn up. Outside staircases have been erected at the extreme wings of the male and female divisions of the main asylum so as to form alternative exits from the first floors. The facility with which the female patients could descend such a staircase was tested at the time of the visit, and it was found that 42 patients and 2 nurses passed from the dormitory to the ground in less than five minutes. The new Female Villa has not yet been fitted with external staircases; when this is done the exits should be alternative to the existing staircases, and should be approached by ordinary glass doors.

The books and registers were examined and found correct.

MONTROSE ROYAL ASYLUM,
12th and 13th August 1904.

There were on the 12th instant 691 patients on the registers of the asylum,

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in the proportion of 316 males to 375 females. Of these, 3 males are voluntary boarders, 52 males and 77 females are private patients, and 261 males and 298 females are paupers. One male has, since last visit, been transferred from the private to the pauper list.

Except one private male patient, who is absent on statutory probation, all were resident and were afforded an opportunity of making any statement they desired.

The following changes in the population have occurred since last visit:—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted, . . .	8	9	19	20	56
Discharged recovered, .	0	4	11	12	27
Discharged unrecovered, .	1	0	2	0	3
Died, ...	5	1	5	13	24

The changes among the voluntary inmates consist in 2 gentlemen having left the asylum. Since last visit the private patients have increased by 6, and a decrease of 4 has occurred among the paupers. The number of pauper patients discharged improved or unrecovered is very small, and during the ten years, 1892-1901, the percentage of pauper patients discharged relieved or unrecovered to domestic or private care from this asylum is half the average percentage for all Scottish asylums.

Two-thirds of these patients were sooner or later removed from the poor-roll. The judicious discharge of such patients is, therefore, from every point of view desirable, as it prevents undue accumulation among the pauper population and relieves the ratepayer from a burden he ought not to bear.

The deaths are registered as due to organic brain disease in 7 cases, to senile decay in 7 cases, to exhaustion from acute mental affections in 3 cases, to phthisis pulmonalis in 3 cases, to general paralysis in 2 cases, and to pneumonia and cardiac disease each in 1 case. *Post mortem* examinations were made in 9 instances, or in the somewhat low proportion of 37·5 per cent. of the deaths.

The Register of Restraint and Seclusion contains 2 entries, referring to the restraint of a female patient in order to prevent homicidal attacks on the nurses. One casualty is recorded, a fracture of the femur due to an accidental fall. The Register of Minor Casualties is kept in a manner which shows that the causes of bruises and other small injuries are fully inquired into. One escape occurred in which the patient was absent overnight before being brought back.

The changes in the nursing staff are as follows:—4 attendants and 3 nurses have resigned, 1 attendant and 1 nurse have been dismissed, and 4 attendants and 8 nurses have been engaged. The dismissals were for offences not connected with the patients. An important advance in the nursing arrangements has recently been made by Dr. Havelock. Two female nurses have been placed in charge of the male sick ward. There can be no doubt that female nurses are especially well-fitted for this work; the patients are more sympathetically cared for, the nursing is more efficient, the wards are better kept, and the presence of the nurses is acceptable to the patients and has an inhibitory and beneficial influence on the behaviour of the patients. The advantages and benefits of female nursing in the sick and infirm male wards are getting widely recognised, and Dr. Havelock is to be congratulated on the progressive manner in which he is administering the asylum. There are 6 attendants and 7 nurses on night duty, and the arrangements for night supervision were inquired into and found satisfactory. From a return made there are 126 males and 110 females who are under continuous night supervision, and the number of wet beds is under 2 per cent.; a fact which is creditable to the night staff. A course of systematic lectures and practical instruction was given to the staff during the winter, and those who presented themselves at the Medico-Psychological examination passed and obtained the certificate of proficiency in mental nursing.

The new female villa is in partial occupation, 34 patients being in residence; it has been most suitably and comfortably furnished and liberally supplied with pictures and other objects of interest. Its accommodation is throughout of a highly satisfactory character. A kitchen has been provided which is adequately equipped, and the cooking gives interesting occupation to several

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patients. An alternative escape staircase from one of the dormitories has been erected. The panes in the lower sashes of the dormitory windows have been effectively and unobtrusively guarded. This house has been placed under the separate management of the head nurse, who is responsible to the Medical Superintendent as to its condition and the care of the patients.

The general condition of the inmates was highly satisfactory; with few exceptions they were free from manifestations of excitement, and on the whole were contented. There were no complaints calling for mention. The clothing was varied and good, and a favourable report can be given in the matter of personal neatness. On both days of the visit the dinners in the main asylum were seen; they were liberal and well-cooked meals, and were evidently appreciated. Grace is sung before dinner, and the service is orderly and expeditious. The occupation of the men in healthy outdoor work is carefully attended to: there are 8 squads, comprising 108 men, daily engaged in work on the farm, garden, and grounds. Outdoor labour is beneficial to their bodily health and condition, and renders them more contented and easily managed. Two hundred and forty females, 47 private and 193 pauper, are registered as daily occupied in useful work. From the large number on parole it is evident that every patient capable of enjoying this privilege is granted it. In no asylum in Scotland is this phase in the treatment of the patients excelled. Divine service last Sunday was attended by 188 males and 156 females.

There were 17 males and 32 females confined to bed, and it was abundantly evident that they were being efficiently nursed and skilfully treated. It is understood with approval that new cases are now admitted and treated in the hospital, where a ward is set apart for the purpose. This new arrangement will greatly favour the early recovery of the curable. Dr. Havelock has issued Caution cards to those in charge of suicidal cases: these cards are signed by all the attendants of the ward in which the patient is placed. This divides the responsibility among the whole staff of the ward. It is suggested that to individualise the responsibility it should be required that the card be in possession of the attendant or nurse who is in immediate charge of the patient.

The asylum was throughout scrupulously clean, in excellent order, and presented many bright features. Repainting and repapering are in constant progress, which adds greatly to the cheerfulness of the wards. The gallery in the main asylum for the private male patients has been completely renovated and redecorated, and the result is highly satisfactory. The dormitories were well-aired, and the bedding clean and in good order. Straw palliasses when worn out should be replaced by wire mattresses. Alternative exits have been provided for the upper dormitories of the hospital. The grounds of the asylum are admirably kept, and never looked more pleasant than they do at present.

Everything seen during the visit bore evidence of the ability and success of Dr. Havelock's management.

The registers and books were examined and found to be regularly, correctly, and neatly kept.

James Murray's Royal Asylum, Perth.

James Murray's Royal Asylum, Perth, 29*th June* 1904.

The following statement shows the changes which have taken place in the population of the asylum since last visit:—

	Certificated Patients.		Voluntary Inmates.		Totals.
	M.	F.	M.	F.	
On register 16th November 1903,	72	60	3	3	138
Admitted,	13	11	1	2	27
Discharged recovered,	1	3	—	—	4
Discharged unrecovered,	7	3	—	—	10
Died,	6	4	—	—	10
On register at this date,	71	61	4	5	141

The deaths are registered as due to heart disease in 2 cases, to senile decay in 2 cases, to phthisis in 2 cases, and to cirrhosis of the kidney, chronic gastritis, general paralysis, and suicide by strangulation in one case each. *Post mortem* examinations were made in eight instances.

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There are three entries in the Register of Accidents, two of which are of minor importance; the third refers to the case of suicide by strangulation which is included in the list of deaths. The patient, a gentleman, was stated on admission to be dangerous to others but not suicidal. On the morning after admission he assaulted one of the attendants and immediately afterwards strangled himself with the sleeve of an undershirt. The usual official investigation showed that no blame attached to those who were in immediate charge of him at the time.

There are 5 entries in the Register of Restraint and Seclusion, referring to the restraint of 2 persons on account of violent excitement.

The two new villas—one for ladies and the other for gentlemen—are now occupied. They have been erected at a cost of about £2200 each, which moderate sum compares advantageously with any similar buildings for the insane in this country. They have been fitted and furnished internally so as to provide suitable and comfortable accommodation for patients paying the higher rates of board.

The institution now possesses the means of placing patients in no less than six different houses, including the main asylum and the seaside house at Elie. This great variety of accommodation meets the wants of all kinds of patients and undoubtedly tends towards greater contentment.

Between the two new villas stands the new chapel, which but for its furnishings is practically finished. It is interesting to learn that the furnishings of the chancel are a gift from former assistant medical officers of the institution, and that the principal stained-glass window and the Communion Table are the gifts respectively of Mrs. Haultain and Miss Malcolm, daughters of former physicians of the institution.

Since the opening of the villas it has been found possible to structurally reorganise the recreation-hall and dining-rooms. One of the former dining-rooms is to be used as a billiard-room in immediate connection with the gentlemen's division, and the present billiard-room is to be divided up into visiting-rooms. The new dining-rooms are now conveniently situated for the service of meals. They are tastefully decorated and suitably furnished. The new recreation-room is a handsome apartment 40 feet long by 80 feet wide. It is well lighted, and the heating and ventilation have been specially designed on a new principle. There is a large permanent stage for concerts, lectures, theatricals, &c. The stage has been constructed with special attention to danger from fire. The walls, which are carried through the roof, and the floor underneath the stage, are fireproof, and there are openings for the escape of smoke. There is in addition an automatic fireproof curtain, and it is proposed to provide automatic sprinklers on the dry-pipe system. The numerous additions and alterations which have been cursorily referred to have had the effect of greatly transforming the appearance of the institution and of adding to its efficiency.

The patients were found on the whole cheerful, free from excitement, and as contented with their care and position as could be expected. The extended methods of classification referred to above, and the great amount of personal liberty which the patients enjoy, no doubt contribute towards this desirable effect. At the date of the visit 19 patients had the liberty of parole beyond the grounds, and 28 patients were on parole restricted to the grounds.

The health of the patients was good. Only 1 gentleman and 5 ladies were confined to bed, and these chiefly on account of mental ailments. Dr. Urquhart has recently undertaken an investigation into the number and origin of the cases of phthisis in the institution during the past twenty-four years. There were in all 32 such cases. Of these, 7 recovered mentally and were discharged, 12 recovered from the disease, and 13 died. Dr. Urquhart is of opinion that many of those patients who were not ascertained to be suffering from the disease on admission had latent phthisis, for in several instances the history revealed the fact that they had had previous attacks.

The number of night nurses has been increased, with, it is understood, considerable benefit to the patients under special treatment or observation. The night nurses are housed in a cottage where quiet can be obtained during the day-time.

The asylum was found in excellent order in every department.

The books and registers were examined and found correct.

JAMES MURRAY'S ROYAL ASYLUM,
26th October 1904.

There are at this date on the registers of the asylum the names of 135 certified patients, in the proportion of 69 gentlemen to 66 ladies, and there are also the names of 3 gentlemen and 7 ladies who are voluntary boarders. One gentleman and 2 ladies are absent on pass, and 4 gentlemen are in residence at the marine branch of the asylum at Elie. This seaside change is beneficial to both the curable and incurable patients.

Since the visit on 29th June 1904 the following changes have taken place :—

CERTIFICATED PATIENTS.

	M.	F.	TOTALS.
Admitted,	5	7	12
Discharged recovered,	1	0	1
Discharged unrecovered,	5	1	6
Died,	1	1	2

VOLUNTARY INMATES.

	M.	F.	TOTALS.
Admitted,	0	2	2
Left,	1	0	1

The deaths are registered as due to general paralysis and bronchopneumonia, and in each case a *post mortem* examination was made.

The Register of Restraint and Seclusion contains 17 entries. In 3 instances they refer to the use of the wet pack for 15 or 20 minutes, in order to subdue long-continued excitement. The Assistant Medical Officer is present during its application. In 14 instances they refer to the use of the jacket for surgical reasons. Four casualties are recorded—three were slight in character, and one resulted in a burned tongue from attempting to swallow ammonia from a smelling bottle. One escape has occurred—a gentleman wandered away when on parole.

The following are the changes in the staff since last visit :—3 attendants and 4 nurses have resigned, 2 attendants have been dismissed, and 4 attendants and 5 nurses have been engaged. The staff of the asylum is a large one, and consists of 5 officers, 23 attendants, 25 nurses, 10 artisans, and 20 servants. For day duty there are 21 nurses and 20 attendants, and 3 attendants and 4 nurses are employed on night duty. One of the houses in the grounds is now used as sleeping accommodation for the night nurses.

The distribution of the patients is as follows :—121 are in the main asylum, 10 in Kincarrathie, 6 in the new villas, 4 at Seven Gables, Elie, and 1 at Mount Tabor. The patients in the separate houses obtain all the advantages of a comfortable home free from arrangements which suggest asylum detention, while at the same time receiving the care and supervision which their mental condition requires.

The chapel was formally opened on 29th September. It has been pleasingly furnished and effectively decorated, and no pains have been spared to render it in every way suitable for the purpose for which it has been built. Almost the whole cost of erecting it has been met by subscriptions, fully a third of which have been contributed by former and present patients or their friends. The chapel may therefore be largely regarded as a thank offering to Dr. Urquhart from those who have been under his care, a fact which should afford him much gratification.

The improvements in the Browne Gallery have been completed, and the results are most satisfactory. The new dining-room is a large apartment tastefully furnished and decorated. The new recreation hall is a spacious, handsome, and well-lighted room. Its method of heating and ventilation is unique, and has been found very effective. The stage is in process of being equipped, and Dr. Urquhart pointed out the many precautions against fire which have been provided, and also the means supplied to combat it should one occur. These two new rooms afford accommodation of exceptional excellence, which cannot fail to add to the comfort of the patients and facilitate administration. The next improvement contemplated is the conversion of the present billiard room into visiting rooms.

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The general result of the visit was to confirm the opinion expressed in previous reports as to the marked ability and conscientious painstaking which are displayed in the management of the asylum. The patients were, with few exceptions, free from excitement, and apart from one or two appeals for discharge were, generally speaking, contented. Their appearance in regard to dress and personal neatness testified to their receiving every attention as to these matters by the staff. There were 2 gentlemen and 9 ladies confined to bed, and it was evident that they were skilfully treated and efficiently nursed. One gentleman and 7 ladies are acutely suicidal, and all of them have to be most carefully watched. Five gentlemen and 2 ladies are epileptic. Fifty-one gentlemen and 49 ladies are induced to engage themselves in useful occupations. Twenty of the gentlemen work in the garden and grounds, and they assisted materially in building the sub-structure of the chapel, also in the mason work of the tower. Forty-eight patients are on parole—20 beyond, and 28 within the grounds. This is a large and creditable proportion.

There is an interesting feature in the administration which is worthy of record. Each recovered patient takes away on discharge a letter of enquiry as to treatment and as to suggestions for improvement in management. The answers are of distinct value, and the few which contained complaints afforded useful information. The adoption of this procedure indicates an earnest desire to know and to remedy any defects in the care of the patients and in the management which may occur from time to time.

The asylum was found everywhere in excellent order, comfortably heated, and well ventilated. On account of the extension of the accommodation, and of the alterations referred to, an additional boiler has been found necessary, and an extension of the boiler-house.

The registers and books were examined and found regularly and neatly kept.

Perth District Asylum, Murthly.

PERTH DISTRICT ASYLUM,
31*st March* 1904.

There are 369 patients—174 men and 195 women—on the register at this date. Of these all, except one man who was absent on statutory probation, were personally seen in the course of the visit.

It is gratifying to observe that there is a decrease of 6 men and 5 women in the numbers resident since last visit, the removals from all causes having exceeded the admissions by the number stated. This fact is principally due to the regular discharge of unrecovered patients which, as was pointed out in the preceding entry, has been a feature in the administration of this asylum for several years past.

The following tabular statement shows the changes which have taken place in the population of the asylum since the last visit :—

	Pauper Patients.		
	M.	F.	TOTALS.
On Register 17th November 1903,	180	200	380
Admitted since,	14	21	35
Discharged recovered,	6	10	16
Discharged unrecovered,	8	6	14
Died,	6	10	16
On Register at this date,	174	195	369

The causes of death, which in 11 instances out of 16 were verified by *post mortem* examination, may be classified as follows :—gross disease of the brain and nervous system, 4 cases ; heart disease, 3 cases ; tuberculosis, 2 cases ; senile debility, 2 cases ; general paralysis, 2 cases ; and epilepsy, anæmia, and exhaustion from acute melancholia, 1 case each. One of the deaths from heart disease was in the case of a male patient, who expired so suddenly that the matter was reported to the Procurator-Fiscal, who held an enquiry.

There are four entries in the Register of Accidents, including the sudden death just mentioned. Two of these refer to fractured ribs in the case of 2 female patients, and one to a badly cut ear in the case of a male patient.

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These accidents were not serious in their consequences, and they were not the result of intentional violence on the part of other people.

The Register of Restraint and Seclusion contains 57 entries. Of this unusually large number 41 refer to the restraint of a female patient for surgical reasons, and the remainder to the seclusion of three female patients on account of epileptic excitement.

The number of patients attending Divine service last Sunday was 145. This is scarcely 40 per cent of the inmates, which is too small a proportion.

The treatment of the patients again attracted favourable notice. The newly admitted and the acute cases are subjected to active medical treatment, which consists of confinement to bed in the majority of instances and the application of remedies founded upon the newest and most scientific knowledge of the physical processes which accompany the manifestations of mental disease. It was a pleasure and a privilege to listen to Dr. Bruce's exposition of the history and clinical particulars of each case, and to observe the appreciation of the fact by the patients themselves that everything possible was being done to promote their recovery. Patients in general hospitals often show an interest in the progress of their own cases; but it is certainly novel to see the same thing among several subjects of acute mental disorder. It proves the superiority from this point of view of the active over the merely expectant form of treatment. The results, especially in melancholia and certain forms of mania, of these special forms of treatment are highly successful. In addition to clinical research, Dr. Bruce continues to prosecute those scientific enquiries into the causes of insanity to which commendable references have so often been made in these reports.

The asylum was found as usual in good order. The erection of the new villa for female patients is making satisfactory progress. Without altering the details of its place, the relative positions of the rooms as originally fixed have been transposed, so that the dayroom dormitory shall face the south and the dining-room look to the north. This change is an improvement.

The piggeries in connection with the institution are being renovated and repaired, and an additional piggery is being built. The cutting down of a number of trees and the removal of undergrowth, with the object of improving the condition of the roads on the asylum estate, has partially lightened up the surroundings of the buildings, which were formerly too much overshadowed by trees.

The changes among the attendants and nurses have been gratifyingly few. Two men and 2 women were engaged; 1 man and 2 women resigned; and 1 man was dismissed for incompetence.

The books and registers were examined and found correct.

PERTH DISTRICT ASYLUM,
25th October 1904.

There are 181 men and 195 women, 376 patients in all, on the register of the asylum at this date. One woman is absent on statutory probation with a view of testing her fitness for domestic care before being finally discharged. All patients resident were seen and afforded an opportunity of making any statement they may have desired.

The following statement shows the changes which have occurred in the asylum population since the previous visit on 31st March 1904:—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
Admitted, ...	23	31	54
Discharged recovered, ...	7	12	19
Discharged unrecovered, ...	4	3	7
Died, ...	5	16	21

During the period dealt with in this report there has been an increase of 7 in the number of men in residence, and of 1 in the number of women. Of the patients discharged improved or unrecovered, 4 were sent to the care of relatives, and 3 were transferred to other establishments.

The deaths were the result of natural causes and were verified by *post mortem* examination in the proportion of 52 per cent. An increase in this proportion

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is desirable whenever the consent of relatives can be obtained. These examinations are of the greatest importance on account of the protective influence over the living which results from the knowledge that in all cases of death an autopsy will be made. The deaths are registered as due to senile asthenia in 8 cases, to brain disease in 4 cases, to cardiac disease in 4 cases, to exhaustion from acute mental affections in 2 cases, and to phthisis pulmonalis, tubercular meningitis, and pneumonia in 1 case each.

The Register of Restraint and Seclusion contains 33 entries. In 26 instances they refer to the application of bandages to the hands in order to prevent the removal of surgical dressings, and in 7 instances to the use of seclusion for periods varying from 2 to 8 hours on account of acute and dangerous excitement. Four casualties have occurred—an injury to an eye from a blow from a fellow-patient, and 3 involved a fracture of a bone' all accidentally sustained. One patient has escaped, and was absent overnight before being brought back.

It is satisfactory to be able to report that the changes in the nursing staff have been few—3 nurses have resigned, and 3 have been engaged. Since last visit there has been no change in the male staff; in fact, for about a year and a half only 2 attendants have resigned and 1 has been dismissed. This indicates that the male staff is an exceptionally stable and satisfactory one. The fewness of the changes also points to able and tactful administration. The day staff comprises 12 attendants and 4 nurses in the male and 16 nurses in the female division, which gives a ratio of 1 attendant to every 11 patients and 1 nurse to every 12, a proportion which is somewhat low. For night duty there are 4 attendants and 5 nurses—the ratio being 1 to 45 males and 1 to 39 females.

Satisfactory progress is being made towards the internal completion of the new female villa. It has been found practicable to add at a moderate cost an attic flat to the villa, which contains suitable bedrooms and sitting-rooms for nurses and servants. The provision of this accommodation will in all likelihood set free a dormitory in the main building for the use of patients.

The boiler-house is now equipped with three boilers, two of which can be worked up to 120 lbs. pressure. It is understood with satisfaction that the District Board have resolved to duplicate the electric plant. At present there is only one engine and one dynamo. Should a breakdown in these occur, dangerous expedients, such as lamps, &c., would have to be resorted to for the temporary lighting of the asylum. Two combined sets, each with engine and dynamo, are now to be provided, which will supply the light direct and thus obviate the necessity for expensive storage of electricity.

Except for noisy excitement among a few of the more troublesome women, there were mostly good behaviour and quietness of demeanour. A small number of each sex appealed for discharge, none of whom were mentally fit for liberation. A male patient made a complaint about the bathing arrangements, which was investigated and discussed with Dr. Bruce and the head attendant. It was found that his statements were exaggerations. A favourable report can be given of the appearance of the patients and of the neatness of their clothing, particularly that of the women. The dinner at this date consisted of peasoup, bread, tinned meat, and potatoes, and it did not appear to be unpopular with the patients. There are 110 men and 107 women, or 67 and 64 per cent. respectively, registered as employed in useful work. Fifty-five of the men are daily engaged in healthy outdoor work on the farm, garden, and grounds. One hundred and ninety-three, or 51 per cent., attended Divine service last Sunday.

There were 7 men and 27 women confined to bed, the nursing of whom was efficient in every detail. The medical work of the asylum is of a high order. Not only is each case studied clinically in a most thorough manner, but scientific and original investigations are also made with the object of elucidating more clearly the causation and true nature of the mental disorder. The knowledge thus acquired has resulted in new doctrines as to the pathogenesis of insanity, and in methods of treatment based on the outcome of these researches. Such work deserves to be mentioned with commendation.

The asylum was throughout in good order. Repairs, repainting, and redecoration receive due attention, and the dayrooms, dormitories, and corridors looked bright and cheerful. The supply of plants and other

objects of interest to the wards is abundant. The beds and bedding were in a thoroughly satisfactory condition. Appendix B.

The case books and official registers are regularly and carefully kept. Commissioners' Entries.

Royal and District Asylums.

ROXBURGH DISTRICT ASYLUM,
8th March 1904.

The asylum was last visited on the 26th October 1903. Since then the following changes in population have taken place :— Roxburgh District Asylum.

	PRIVATE AND PAUPER PATIENTS.		
	M.	F.	TOTALS.
On Register 26th October 1903, .	142	187	329
Admitted, ...	10	7	17
Discharged recovered, . . .	2	4	6
Discharged unrecovered, . .	2	4	6
Died, ...	4	3	7
On Register at this date, . . .	144	183	327

There are 2 men and 6 women absent on statutory probation. With these exceptions all the patients were resident and were seen in the course of the visit. Of the 327 patients, on the register, 7 men and 13 women are private patients who belong to the district, and who, though paid for out of private funds, receive the same treatment and accommodation as the rate-supported inmates.

The deaths, which in the period covered by this report amount to only a little over 2 per cent. of the resident population, are registered as due to cancer in 2 cases, to phthisis in 2 cases, to pneumonia in 2 cases, and to general paralysis in 1 case. *Post mortem* examinations were made in 5 instances, permission for the examination being refused in the other two instances.

Of the 6 entries in the Register of Accidents only 1, a dislocation of the elbow joint caused by falling during an epileptic fit, requires notice. The patient, a man, is recovering satisfactorily from the injury. A separate record of minor injuries is regularly kept.

There are no entries in the Register of Restraint and Seclusion or in the Register of Escapes.

There are 12 male and 14 female attendants (excluding head attendants) on day duty, which gives a proportion of 1 male attendant to 11·8 patients and 1 female to 12·6 patients. This is a lower proportion than is usual in asylums at the present time, but in the overcrowded state of the establishment it is useless to recommend an addition to the staff. Seven attendants, 4 men and 3 women have been engaged, 3 women have resigned, and 1 man was dismissed for misconduct, since last visit. One hundred and forty-eight patients, 45 per cent. of the resident number, attended Divine service last Sunday.

Ninety-six men and 113 women were industrially employed at the time of the visit. Of these, 42 men, notwithstanding the somewhat inclement weather, were working outside, 30 women were working in the laundry, and 29 women were sewing or knitting.

It has again to be recorded that the asylum is much overcrowded. On the male side there are 120 beds and 144 patients on the register, on the female side 160 beds and 183 patients. There are thus practically 50 patients on the register above what the institution can properly accommodate. In a comparatively small asylum this is undoubtedly a serious matter, and there is further reason for concern in the fact that there appears to be no immediate prospect of relief, especially as regards the female division. The new male hospital has not made such satisfactory progress as was expected, but it should be fully completed within the next 12 months at the latest. The female patients, on the other hand, must continue under the present unfavourable conditions until additional accommodation is provided for them. It has been suggested in previous entries that the boarding out of harmless, incurable lunatics might be tried as a remedy for this congestion of the asylum population, but it would appear that the social and other conditions in the counties forming this lunacy district do not favour any considerable

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Roxburgh District Asylum.

extension of the system. If that be so, it is feared that an addition to the female side of the asylum must be regarded as the only way out of the difficulty.

The asylum was seen under conditions which can only be described as unfavourable. Following upon the recent wiring of the house for the electric light, many of the apartments were being painted, and this, combined with the overcrowded state of the wards, gave an unwonted appearance of disorder. Many of the wards and dormitories were seriously overcrowded. For instance, in the male sick room, which should, properly, only accommodate 10 patients, there are three times that number, and at night 14 men sleep there, 5 of them on shake-downs. For these adverse conditions, of course, no blame attaches to Dr. Johnstone or his staff. On the contrary, the amiable and generally contented condition of the majority of the patients was a testimony to the efficiency of the management despite the somewhat distressful conditions referred to. The general health of the inmates was good, and there has been no epidemic or outbreak of serious illness among them.

The installation of electric light has been completed. The erection of six outside iron staircases, to serve as emergency and alternative exits from the dormitories in case of fire, has been nearly completed. The arrangements for the protection of the patients and the asylum buildings from fire have been thoroughly and carefully planned, they appear to be capable of providing effectively against any ordinary occurrence of fire, and nothing that could be foreseen has been left to chance.

The books and registers were examined and found correct.

ROXBURGH DISTRICT ASYLUM,
21*st November* 1904.

There are at this date 144 males and 182 females—326 patients in all—on the register of the asylum. Of these, 8 males and 12 females are private patients, and 136 males and 170 females are paupers. In the foregoing figures effect has been given to the transference of 1 male from the pauper to the private list. Five men and 5 women are absent on statutory probation, and 1 man is absent on pass. The number resident is 315, all of whom were seen during the visit.

Since 8th March 1904, the date of the previous report, the following changes in the population have taken place :—

	PRIVATE AND PAUPER PATIENTS.		
	M.	F.	TOTALS.
Admitted, ...	30	24	54
Discharged recovered, ...	12	13	25
Discharged unrecovered, . .	2	0	2
Died, ...	16	12	28

The number resident has, fortunately, in view of the overcrowded condition of the wards, decreased by 4. Constant and praiseworthy efforts are made by Dr. Johnstone to keep down, as far as possible, the growth of the asylum population. Patients have been, and are being, sent out on probation or on pass with the object of testing their fitness for liberation. A large proportion of these patients do well and remain permanently at home, but in a percentage of cases mental changes occur which necessitate re-admission to the asylum. A fact worthy of note is that 127, or 38·6 per cent. of the present inmates have previously been under care in the asylum. If those who are at present on probation or pass are added, the percentage of those who have been, and are being, tried at their own homes is 40·3. From these figures it can be concluded that there has been no undue detention. In spite, however, of these efforts, the number of pauper inmates is steadily increasing. On 1st January 1894, 222 were in the asylum, and on 1st January 1904 the number had risen to 305, an increase of 83 in ten years. The percentage of pauper lunatics belonging to the Roxburgh district provided for in private dwellings was, on 1st January 1904, 15, against 18·7 for all Scotland. Berwick had 25 per cent., Roxburgh 13·4, and Selkirk only 9·2. As has been previously indicated, the social condition of the rural population of the district does not favour the extension of this method of providing for the pauper insane.

The deaths are registered as due to cerebral lesions in 8 cases, to heart disease in 6 cases, to consumption in 6 cases, to general paralysis in 2 cases, to pneumonia in 2 cases, to suicide in 2 cases, and to exhaustion from acute mania and peritonitis each in 1 case. The large number of deaths from consumption indicates one of the most serious evils of overcrowding. In 22 instances, or in the creditable proportion of 78·5 per cent. of the deaths, a *post mortem* examination was made. The medical records and pathological journal continue to be carefully and intelligently kept.

The Register of Restraint and Seclusion contains 1 entry referring to the use of seclusion for 30 minutes in a case of violent excitement. Four accidents are recorded, (1) cut on forehead from a blow by a fellow-patient with a broom, (2) severe bruises, the result of an assault on and struggle with an attendant, (3) death from drinking floor-polish, and (4) fatal injuries sustained by a patient after escape, by being run down by a train. The circumstances attending the two fatal cases were fully reported to the Board and investigated by the Procurator-Fiscal. The attendant through whose carelessness the escape occurred has been given notice of dismissal. The register in which all minor casualties, such as cuts, bruises, &c., are recorded is kept in a most conscientious manner. There have been 6 escapes.

The changes among the nursing staff are as follows :—2 attendants and 4 nurses have resigned, and 2 attendants and 4 nurses have been engaged. For day duty there are 12 attendants and 14 nurses, and there are 2 attendants and 3 nurses in charge of the patients during the night.

It is disappointing to have to report that the new male hospital buildings are far from being ready for occupation. It is most unsatisfactory that there should be this great delay in completing them, as the serious overcrowding and inadequate arrangements of the present male sick ward cannot fail to be prejudicial to the mental and bodily welfare of its occupants. The impression produced by the inspection of the whole of the male side was unfavourable. This division is urgently in need of thorough renovation, and this cannot be begun until the majority of the patients are transferred to the new hospital buildings.

The overcrowding of the female division has been pointed out in previous reports. It is therefore recorded with satisfaction that the plans of an extension capable of accommodating 60 patients and containing 12 nurses' rooms, a general bathroom, and a sewing-room, have been passed by the District and General Boards. Schedules for this work are in course of preparation, and tenders are to be advertised for at an early date.

Many of the dayrooms and dormitories in the female division have been rendered brighter and more cheerful by repainting and repapering. The female wards were throughout in good order, and are well supplied with plants, books, periodicals, and other objects of interest. The bedding, which was turned up for the weekly inspection, was ample for the season and in a satisfactory condition.

The patients were, generally speaking, well conducted and quiet in behaviour. They were free from complaint and were evidently on the best of terms with Dr. Johnstone, under whose management, it is clear, they are kindly and skilfully treated. The dinner at this date was an abundant meal, of which appreciation was expressed. Ninety-two men and 111 women are registered as daily engaged in useful work. Seventy-six men and 73 women attended Divine service last Sunday.

Telephonic communication has been installed between the asylum and the Exchange at Melrose and the doctor's house, and it is recommended that it be extended to the male and female hospitals. It is proving a great convenience to administration. The electric lighting of the asylum has been completed, and it has been extended to the cottages. Its many advantages are fully recognised.

It is learned with approval that the District Board have resolved to remove the old and very unsatisfactory piggeries from their present position. Plans for the erection of piggeries on a remote site are under consideration.

The official registers were examined and found regularly and correctly kept.

Appendix B.

Commissioners' Entries.

Royal and District Asylums

Stirling District Asylum.

STIRLING DISTRICT ASYLUM,
31*st May and* 1*st June* 1904.

The number of patients on the register of the asylum on 31st May was 691—364 being males and 327 females. Of these, 30 males and 17 females are private patients, and 334 males and 310 females are paupers. Since last visit 1 female has been removed from the pauper to the private list. There are 3 patients absent on statutory probation and 2 absent on pass; consequently the number resident was 686, all of whom were seen in the course of the visit.

The changes in the population since 9th December 1903, the date of the previous report, have been as follows:—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
Admitted, . . .	7	1	67	50	125
Discharged recovered, .	3	1	28	9	41
Discharged unrecovered, .	1	2	21	5	29
Died, ...	0	0	24	19	43

Since last visit there has been a decrease of 3 in the number of males and an increase of 15 in that of the females. Of the 29 patients discharged improved or unrecovered 10 were sent to the care of relatives, 14 were transferred to other asylums, and 5 were removed to Ireland. From the large number discharged to home care it will be evident that Dr. Robertson is continuing the useful and economical practice of calling for the removal of patients who have ceased to need or benefit by asylum care. The failure of certain parishes in the Stirling Lunacy District to co-operate in this movement is to be regretted, as no special reasons of real weight can be put forward for their refusal to adopt the boarding-out system.

The deaths are registered as due to cardiac disease in 14 cases, to consumption in 9 cases, to cerebral lesions in 6 cases, to general paralysis in 5 cases, to Bright's disease in 2 cases, and to pneumonia, senile decay, atrophy of liver, puerperal septicæmia, pharyngitis, spinal caries, and influenza in 1 case each. Only in 17 instances, or in 39·5 per cent. of the deaths, was a *post mortem* examination made, a much lower proportion than is usual in asylums.

Attention is drawn to the fact that during the period under review 21 per cent. of the deaths were due to consumption. In 1903 the number of deaths from this disease in this asylum exceeded those in any other Scottish asylum. It is therefore understood with approval that the District Board are favourably considering the erection of a sanatorium for the isolation of patients who are the subjects of this infective malady, and for their treatment on the present most approved principles. In providing a separate hospital for this class of patients these two very desirable objects will be attained.

There is no entry in the Register of Restraint and Seclusion, and it is a noteworthy feature in the administration of the asylum that since October 1901 no patient has been secluded, that is, locked up in a single room during the night. This great advance in the treatment of the insane is effected by a numerically strong night staff efficiently supervised by a night superintendent. The Register of Accidents contains 1 entry, referring to a Colles' fracture sustained through slipping on a polished floor. All minor casualties are carefully recorded, and this ensures due attention being paid to the causes which lead to their occurrence. One patient has escaped, who was absent over night before being brought back.

The special methods of nursing which have been fully detailed in previous reports, and which it is unnecessary again to describe, continue to be productive of the best results as to the care and welfare of the patients, and to be so successful as to fully merit the commendation which has been bestowed on the present nursing arrangements in vogue in this asylum. Further developments of these methods are contemplated, which, it is certain, experience and success will more than justify. The whole scheme is based on broad and enlightened principles, and constitutes a valuable and important advance in asylum administration.

The changes in the staff of attendants and nurses have been as follows:—6 attendants and 17 nurses have resigned, 2 attendants and 4 nurses have been dismissed, and 11 attendants and 24 nurses have been engaged. The dismissals were not for offences connected with the patients. The ratio of the day staff

to patients is 1 to 10, and of that employed on night duty 1 to 34. These proportions are eminently satisfactory. Four married attendants have lately been provided with house accommodation, and the changes among the attendants would greatly decrease if more cottages were built for them. It is understood that 4 applications for house accommodation have been made, from 3 married attendants, and from 1 who is about to marry. A nurses' home has, in other asylums, been found to attract a superior class of nurses, and to conduce to the retention of those who are trustworthy and capable.

During the visit the patients were, without exception, orderly and well behaved, and the appeals for discharge were unusually few in number. There were no complaints calling for comment. In regard to clothing and personal tidiness, the condition of the patients was highly satisfactory, the clothing of the women being of good quality and tasteful in appearance. The general health is good, but there were 45 patients confined to bed, some of whom were seriously ill. The medical care and treatment of these is of a high standard. The hospital and senile wards always attract favourable attention on account of the excellence and efficiency of their arrangements for the nursing and comfort of those suffering from acute bodily and mental diseases, or the infirmities of old age. The dinners seen in the course of the visit were substantial and popular meals. The table appointments were satisfactory, and the food is served in an orderly manner. A pleasing feature of the dinner in the hall of the succursal block was the playing of a selection of music on the piano during the meal. The number who attended Divine service last Sunday was 273. Outdoor games and associated amusements are liberally provided, and a great deal is done otherwise to relieve the monotony of asylum life.

The record of employment is as regards the women satisfactory, 213 being registered as daily engaged in useful work. But it is observed that the number of men employed in healthy outdoor work on the farm, garden, and grounds is small, the percentage to the number resident being one of the smallest when compared with the percentages of other Scottish asylums. This fact indicates that the amount of land in possession of this asylum is inadequate, and it is to be regretted that the District Board failed to acquire additional land by purchase. It is strongly recommended that if an opportunity should occur of taking adjoining land on lease it should not be lost. This asylum has only 0·14 acre per male patient, whereas at other asylums the amount of land varies from 1·6 to 2·2 acres per male patient, and consequently at these asylums the number of men employed at healthy agricultural work is from five to seven times larger than at this asylum.

The various wards were scrupulously clean, and unstinted praise can be given in respect of the excellent condition in which the asylum continues to be maintained. The drains in connection with the main building have been renewed, ventilated, and provided with efficient traps, and those in connection with the other sections are to be similarly dealt with.

The fire-extinguishing arrangements have been greatly improved, twelve dozen fire buckets have been distributed throughout the asylum, new hose and apparatus have been procured, and by means of a stopcock the whole pressure of water in the main supply pipe at the gate lodge can, in the case of fire, be diverted to the hydrants in the asylum grounds. A hooter has been erected in the engine-house, and electric communication between every section and the engine-house is about to be installed. Double exits from all the dormitory floors of the main building are being provided by means of four outside iron staircases. The Clerk of Works, who is the head of the fire brigade, now resides within the asylum grounds.

The medical staff consists, in addition to Dr. Robertson, of three assistants —Dr. Baugh, Dr. Macfarlane, and Dr. Martin.

The official registers were examined and found regularly and accurately kept.

STIRLING DISTRICT ASYLUM,
25th and 26th October 1904.

Since the date of the previous report the following changes in population have taken place ;—

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Commissioners' Entries.

Royal and District Asylums.

Stirling District Asylum.

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
On Register 31st May 1904,	31	16	333	311	691
Admitted, . . .	3	3	63	42	111
Discharged recovered, .	2	—	23	15	40
Discharged unrecovered, .	2	3	16	16	37
Died, ...	1	1	11	14	27
On Register at this date, .	29	15	346	308	698

In the above figures effect has been given to the transference of 1 man and 1 woman from the private to the pauper list and of 2 men from the pauper to the private list.

With the exception of 2 men and 1 woman who were absent on statutory probation all the patients were resident and were seen in the course of the visit.

It will be observed from the above figures that, notwithstanding a continued high admission rate, the numbers resident have not increased correspondingly. This is due to the following reasons:—(1) the recovery rate has been high, averaging 36 per cent. of the admissions; (2) the numbers discharged unrecovered during the past five months show that constant attention is directed towards the removal of all patients who do not require asylum care. Of the 37 patients so discharged, 8 who were transferred to other asylums need not be included in this statement. The remaining 29 were disposed of as follows:—5 were sent to the lunatic wards of poorhouses; 18 were sent to the care of relatives; and 6 were boarded out with strangers. In Dr. Robertson's last annual report it is stated that during the last three years no less than 203 patients were discharged unrecovered, the greater number of whom were placed under family care. In asylums such as this, the admission rate, as a rule, greatly exceeds the combined recovery and death rates as well as the numbers who are, under existing regulations, transferred to other asylums. It is therefore manifest that the only prevention of undue accumulation is the removal of suitable patients to private dwellings, and this method has in recent years been most successfully employed in this asylum; and (3) the third reason for the proportionally small accumulation is the prevalence of a somewhat high death rate during the past few years, In his last annual report Dr. Robertson clearly indicates that the mortality rate of the asylum is influenced unfavourably by the high admission rate, by the increasing prevalence of general paralysis, which has been nearly trebled in the last ten years, by the increase in tuberculosis, and in the number of senile patients sent to the asylum. In this connection it must be remembered that the character of the district is gradually becoming more urban, and that the diseases from which the newly admitted patients suffer are every year becoming similar to those met with in large towns.

The causes of the deaths which have occurred in the interval covered by this report are as follows:—heart disease in 6 cases, general paralysis in 5 cases, septicæmia in 3 cases, pneumonia in 2 cases, Bright's disease in 2 cases, tuberculosis in 2 cases; to the following diseases in one case each, namely, cancer, enteritis, strangulated hernia, peritonitis, cerebral softening, and exhaustion from melancholia; and in one case death was due to being run over by a railway train. *Post mortem* examinations were held in 21 instances.

There are 3 entries in the Register of Accidents, which refer to an injury to the eye caused by a blow from a fellow-patient; to an injury to the elbow caused by a fall; and to the circumstances attending the probable suicide of a male patient. This man had so far recovered from an attack of mental depression that he was able to make himself useful in various kinds of household work. In the performance of this work he was one morning incautiously allowed by one of the nurses to go outside. He disappeared, and his body was afterwards found upon the railway line. Intimation of this death was made, in the usual manner, to the various officials concerned.

Since the asylum was last visited an important change in administration has been introduced, which consists in the appointment of one Matron over the whole asylum. This innovation is based upon the ideal of management now universal in general hospitals throughout the country, and is conceived with the object of bringing asylum administration into line with that of general

hospitals. In itself the conception is laudable and enterprising, and although its results have yet to be subjected to the test of experience there is every reason to believe that it will prove as successful as the many other reforms of a similar nature which have been instituted by Dr. Robertson in this asylum. Acting immediately under the Matron, who is herself a trained nurse, are 6 assistant-matrons, all of them trained nurses, who are constantly present in the wards. Apart from every other consideration, the supervision of the care of the patients which this arrangement secures is sufficient to recommend it, for it has to be admitted that one of the weakest points in asylum administration at the present time is the absence of constant supervision in the wards.

The changes in the nursing staff in the period covered by this report have been as follows :—5 men and 17 women voluntarily left the service ; 5 men and 3 women were requested to resign ; and 9 men and 19 women were engaged.

Two hundred and twenty-one patients, 96 men and 115 women, attended Divine service last Sunday. Including those who assist in household work, about 60 per cent. of the population were usefully employed at the time of the visit. The proportion of men employed at outdoor work is smaller than in other similar institutions, and the probable reason for this is that the amount of arable land possessed at present is insufficient to afford an outlet for the work of the able-bodied male patients. The question of the employment of patients relative to the amount of land is discussed in the Forty-sixth Annual Report of the General Board, where it is shown that the best results as regards employment are attained in asylums possessing land in the proportion of about one acre per male patient. One of the conclusions come to in the Report, as the result of definite enquiry, is that where the holding of agricultural land is less than about one-third of an acre per male patient, the constant employment of patients in such work is not attained even with special methods of cultivation, and that, as a rule, the engagement of patients in such work diminishes with the holding until it almost ceases. Upon this basis of computation, therefore, the Stirling Asylum, which only possesses agricultural land in the proportion of about one-seventh of an acre per male patient, is at present at a disadvantage.

The present state of the accommodation of the asylum will be seen at a glance from the following statement :—

	M.	F.	TOTALS.
Beds, . . .	386	324	710
Resident Patients, .	373	322	695
Vacant Beds, .	13	2	15

Against this statement has to be placed the fact that 26 of the women are boarders from the parish of Edinburgh, and may be removed when necessary. It has also to be pointed out that as the male admissions last year exceeded the female admissions by about 40 per cent., the greater pressure for accommodation is likely to be on the male side of the asylum. In these circumstances it is satisfactory to record that a Committee of the District Board has recently visited other asylums in Scotland for the purpose of considering and reporting upon (1) a special hospital for the isolation and treatment of patients suffering from phthisis ; (2) a nurses' home ; and (3) cottages for married attendants. While all three proposals are, for other reasons, commendable, the two first mentioned would indirectly afford additional accommodation. The amount of accommodation capable of being provided in this manner is very considerable, when to the probable average number of phthisical patients is added the large staff of female officials in the asylum. It is understood that the part of the female division of the asylum which would be vacated in this event could easily be adapted for the accommodation of male patients.

As was pointed out in the preceding entry, the arrangements for extinguishing fire have been greatly improved during the past eighteen months, but it is understood that the pressure of water available in the event of an outbreak of fire is still unsatisfactory. The importance of remedying this defect need scarcely be insisted upon.

The Register of Restraint and Seclusion contains no entry. This fact testifies to the success of the present system of nursing, whereby the

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Commissioners Entries.

employment of a large and competent staff, by day and night, renders unnecessary any form of mechanical restraint or seclusion, The same influence was no doubt accountable for the generally sedate conduct manifested by the inmates.

Royal and District Asylums.

The dinners on the two days of the visit were examined and found satisfactory. The service of the food and the good order prevailing during the meals attracted favourable attention.

Stirling District Asylum.

The various divisions and apartments of the institution presented the usual appearance of scrupulous cleanliness, while the furnishings and the liberal floral decorations added an appearance of brightness and cheerfulness to the rooms.

It is due to the present District Board, who are about to relinquish office, to acknowledge the liberality of mind which has led them to foster the many useful improvements in administration to which reference has been made, and to provide these necessary facilities without which no important advance in the treatment of the insane can be made.

The books and registers were examined and found correct.

Private Asylums or Licensed Houses.

PRIVATE ASYLUMS.

Mavisbank Asylum.

MAVISBANK ASYLUM,
1*st June* 1904.

There are 50 patients on the register of the asylum at this date. The sexes are equally divided, there being 25 of each sex. Four ladies and 3 gentlemen are voluntary inmates, all the others are detained under certificates and a Sheriff's order.

Since the asylum was last visited on the 14th September 1903 the following changes among the certificated patients have occurred :—4 gentlemen and 7 ladies have been admitted, 4 gentlemen and 6 ladies have been discharged recovered, and 3 gentlemen have been discharged unrecovered. Among the voluntary inmates. 5 gentlemen and 1 lady have been admitted, and 3 gentlemen and 1 lady have left.

There has been no death and no accident to a patient in the interval covered by this report.

With the exception of one or two of the inmates who were passing through acute attacks of insanity, it is satisfactory to record that the patients as a whole were quiet and free from excitement. Only one gentleman and two ladies demanded interviews, and their statements had reference wholly to what they considered their unnecessary detention in the asylum. It is fair to assume therefore that the majority of the patients are contented and satisfied with the treatment which they receive.

The establishment was found in good order. A very striking change in the interior of the building has been effected by the painting and decoration of the drawing-room and entrance corridor. The work has been tastefully done, and the colours and materials are substantial and durable. The drawing-room has been partially refurnished and the floor covered with new and handsome rugs. The male sickroom is next to be repainted and redecorated. It is very desirable that this department should be furnished with a new and separate exit to the open air, as well as with new bathroom and lavatory accommodation. It was pointed out by Dr. Wilson that the objection which the Commissioners have all along taken to the entrance to the female sick-room could be overcome by leading a covered staircase from the present conservatory to the outer door of this department. It may be said at once that such an arrangement would form a great improvement upon the present entrance.

The case-books contain a large amount of interesting and useful information regarding each patient, and it is satisfactory to record again that they are carefully written up to date.

The books and registers were examined and found correct.

MAVISBANK ASYLUM,
18*th November* 1904.

There are at this date on the registers of the asylum the names of 21 gentlemen and 26 ladies. Of these, 2 gentlemen and 2 ladies are voluntary boarders, and 19 gentlemen and 24 ladies are certified patients. One of the voluntary inmates, a gentleman, is certifiably insane and cannot remain on that footing. One certified gentleman is absent on pass and two voluntary boarders are temporarily absent. All in residence, 44 in number, were seen and afforded an opportunity of making any statement. Three ladies asked for and were granted private interviews.

Since June 1st, 1904, the date of previous visit, the changes among certified patients are as follows:—1 gentleman and 5 ladies have been admitted, 3 ladies have been discharged recovered, and 3 gentlemen have died. Among the voluntary inmates, 2 gentlemen and 1 lady have left.

The deaths are registered as due to general paralysis in two cases and to cardiac disease in one case. A *post mortem* examination was made in one instance.

The Register of Restraint and Seclusion contains 6 entries referring to the use of seclusion on 4 occasions, and to the use of restraint on 2 occasions in the treatment of 2 patients. No accident has occurred, and there has been no escape in which a patient has been absent overnight.

Except those who were in an acute stage of their malady and confined to bed, the patients were tranquil and in general free from complaint. In the matter of dress and personal neatness their condition was quite satisfactory. It was evident that they are kindly and judiciously provided for, and receive medical treatment of the most skilful kind. The case records, which are admirably kept, show that the mental and bodily condition of every patient is most carefully studied, and that the special requirements of each are liberally met. These records constitute clinical work of a high standard.

Amusements are liberally provided; during summer there are drives, picnics, and croquet. A house is taken at the seaside for three summer months at which parties of five reside for several weeks. During winter football and golf are engaged in, and concerts, dances, and other associated entertainments are regularly held.

A marked improvement has been effected in the drawing-room, entrance-hall, and corridors in the ladies' section. The result is most pleasing, as the work has been done in a very artistic manner. The drawing-room is in process of being refurnished with articles of the most recent design, and when completed it will be an elegantly-furnished room. Many of the ladies' bedrooms have been supplied with new beds with spring mattresses. It is understood with satisfaction that the much-required renovation of the gentlemen's sick wards is about to be undertaken. The appearance of these dormitories is at present decidedly shabby. This section of the establishment will never be properly equipped until adjoining lavatory, bath-room, and water-closet accommodation is provided. This recommendation has been repeatedly made.

The official registers were examined and found regularly and correctly kept.

SAUGHTON HALL ASYLUM,
2*nd June* 1904.

There are 71 patients on the register of the asylum at this date. Of these, 23 are gentlemen (1 of whom is a voluntary inmate) and 48 are ladies (4 of whom are voluntary inmates). Since the institution was last visited on the 26th November 1903 the following changes have taken place among the certificated patients:—5 gentlemen have been admitted, 1 lady has been discharged recovered, 1 lady has been discharged unrecovered, and 4 ladies and 1 gentleman have died. The causes of death are registered as due to bronchitis, peritonitis, senility, general paralysis, and melancholia with syncope. Among the voluntary inmates the following changes are recorded:—1 lady was admitted, 1 lady left, and 2 ladies died.

There have been no accidents during the period covered by this report. The Register of Restraint and Seclusion contains 10 entries, which refer to the employment of restraint in the case of one male patient on account of the

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Saughton Hall Asylum.

extreme violence of his behaviour during a maniacal attack, which has fortunately passed off.

It is recorded with pleasure that the general condition of the establishment was such as to merit warm commendation. The rooms used as sitting-rooms by the patients are small and numerous and afford extensive opportunities for classifying the inmates and for grouping them conveniently. These rooms are comfortably and in many instances sumptuously furnished and resemble as closely as possible apartments in a private house.

It was noticed that an unlimited quantity of literature of every description was laid out in each room for the use of the patients. The bedrooms were equally well furnished, scrupulously clean, and properly ventilated.

The patients were on the whole quiet and free from excitement. No complaint that would bear investigation was made by any of them, and it was evident that, so far as that is possible, they were contented. This is probably largely due to the large amount of individual attention they receive, to the personal liberty which is allowed them within the extensive grounds surrounding the institution, and to the comfort of the interior of the establishment, to which reference has already been made.

The written records of the history and progress of each case continue to be kept with that amount of minute care and attention which on previous occasions has elicited well-merited praise in these reports.

The books and registers were examined and found correct.

SAUGHTON HALL ASYLUM,
30*th November* 1904.

There are 70 patients—20 gentlemen and 50 ladies—on the register of the asylum at this date.

Of these, 5 ladies are voluntary boarders, and 20 gentlemen and 45 ladies are certified patients. Three ladies were temporarily absent.

Since 2nd June 1904, the date of previous visit, 1 gentleman and 1 lady have been admitted, 2 gentlemen have been discharged recovered, and 1 gentleman has been discharged unrecovered. There has been no death. During the same period 2 voluntary inmates, ladies, have been admitted, and 2, 1 lady and 1 gentleman, have left.

According to the register, there has been no occasion to use mechanical restraint or seclusion in the treatment of any patient. One casualty resulting in the fracture of the tibia has occurred, and was accidently sustained. There has been no escape.

The patients are surrounded with every desirable comfort, and are evidently treated with great kindness and liberality. Complete tranquillity prevailed during the visit, and no reasonable complaint was made. Two ladies are confined to bed and are most efficiently nursed. Nine ladies are on parole beyond the grounds, and 1 gentleman and 3 ladies have that privilege within the grounds. Carriage exercise is provided daily. During the summer 8 gentlemen and 19 ladies spent from 4 to 8 weeks at Gullane. All these patients are said thoroughly to enjoy this change to the seaside, and to derive benefit from the long walks throughout the surrounding district.

The various apartments of the two establishments, Saughton Hall and Balgreen, were in excellent order. The temperature of both houses was satisfactory. Repainting, repapering, and renewal of furnishings receive due attention. Every sitting-room is abundantly supplied with books, periodicals, and illustrated papers.

The medical functions of the asylum are evidently discharged with skill and ability. The case books contain clinical records of value regarding the history, condition, and progress of the patients. The official registers were found to be correctly kept.

Westermains Asylum.

WESTERMAINS ASYLUM,
16*th April* 1904.

There are 2 gentlemen and 13 ladies in residence at this date. Since last visit 1 lady has been admitted and 1 lady has been discharged recovered.

All the patients gave the impression of being well cared for and judiciously treated. They are free from irksome discipline and are contented. One lady is confined to bed owing to the infirmities of old age, and is efficiently nursed.

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The establishment was found scrupulously clean and in its usual good order. Every room is comfortably and elegantly furnished. The surroundings of the patients are cheerful and pleasant.

Private Asylums or Licensed Houses.

Westermains Asylum.

WESTERMAINS ASYLUM,
17th November 1904.

There are 2 gentlemen and 12 ladies resident in the asylum to-day. Since the 16th April last, the date of the previous visit, 3 ladies have been admitted, 3 ladies have been discharged, and 1 lady has died. The cause of death is registered as senile debility.

The resident patients were all seen in the course of the visit. They were quiet, neatly and suitably dressed, and showed every evidence of receiving adequate care and attention. Their general health was satisfactory, and none of them were ailing or confined to bed.

The house was found, as on former occasions, clean and well aired, and the furnishings were elegant and sumptuous.

The grounds around the house are laid out tastefully, and are kept in excellent order.

PAROCHIAL ASYLUMS.

Parochial Asylums.

Greenock Parochial Asylum.

GREENOCK PAROCHIAL ASYLUM,
4th April 1904.

There are 120 men and 114 women, or 234 in all, on the register of the asylum at this date. Of these, 183 are chargeable to Greenock, 37 to Port-Glasgow, 7 to Gourock, 2 to Inverkip, and 5 to Kilmalcolm.

Since the 7th October 1903, the date of previous visit, the following changes have taken place :—

	Pauper Patients.		
	M.	F.	TOTALS.
Admitted,	20	17	37
Discharged recovered,	15	6	21
Discharged unrecovered,	6	3	9
Died,	6	4	10

The recoveries are 56·7 per cent. of the number of admissions, which is a high and satisfactory recovery rate. Of the 9 patients discharged unrecovered, 5 were transferred to other asylums, 2 were sent to the care of relatives, 1 was boarded out, and 1 was sent to Ireland. During the ten years 1892-1901 the percentage of patients, on the average number resident, discharged improved or unrecovered to the care of related or unrelated guardians from this asylum was 4.4, a percentage which is ·1 higher than the average for all Scottish asylums. It is interesting to note the fact that 3 per cent. were sooner or later removed from the poor roll, and that only 1·4 per cent. are still maintained by their respective parishes. It will be observed that the discharge of quiet and harmless patients who have ceased to require care and treatment in the asylum is in the majority of instances followed by their ceasing to be a burden on the rates.

The deaths are registered as due to status epilepticus in 3 cases, to general paralysis of the insane in 2 cases, to senile decay in 3 cases, and to cancer and cardiac disease in 1 case each. In five instances, or in 50 per cent. of the deaths, a *post mortem* examination was made.

The Register of Restraint and Seclusion contains 105 entries. They refer to the use of mechanical restraint in the form of muffs on 74 occasions in the treatment of 8 patients—in 2 of these cases both restraint and seclusion were on 17 occasions resorted to, and on 14 occasions seclusion was used in the treatment of 4 patients. These figures are high, and the reasons assigned for this large amount of restraint and seclusion are (1) striking out at other patients, (2) restless or outrageous and striking, (3) very outrageous, (4) violent

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Greenock Parochial Asylum.

and tearing face with nails, (5) violent impulses, and (6) destroying clothes. The Register of Accidents contains 1 entry referring to a dislocation of the left shoulder due to a fall. There has been no escape.

Three attendants and 5 nurses have since last visit resigned, 2 attendants have been dismissed, and 5 attendants and 5 nurses have been engaged. The day staff consists, exclusive of the head nurse and head attendant, of 12 nurses and 11 attendants. These numbers give a ratio of 1 attendant to 11 patients, and of 1 nurse to 9·5 patients. In view of the high admission rate and of the acute character of the insanity of those admitted, and of many of those resident, the staff in this asylum should be a maximum one or in the proportion of 1 to 8. If the staff were increased it is probable that the frequent use of restraint would be as unnecessary as it is undesirable. The suggestion contained in the previous entry as to providing separate accommodation for nurses and attendants is one which is worthy of early consideration on the part of the Committee.

The dayrooms and dormitories were found in excellent order and scrupulously clean. Many sections have been repainted and made brighter and more cheerful in aspect. The corridors have been provided with seats, and all exit doors made to open outwards. Three lavatories and water-closets have since last visit been tiled and their sanitary arrangements remodelled. It is understood that the wash-house and laundry, which are not at present satisfactory departments, are to be enlarged and their lighting and ventilation improved. New machinery is to be supplied and the drying closets are to be reconstructed, and, it is hoped, made thoroughly efficient by being supplied with a Musgrave fan.

The inmates of both sexes were sufficiently, suitably, and tidily clothed. Speaking generally, their physical condition indicated a liberal dietary, and the dinner at this date was a substantial and popular meal. Three men and 3 women were confined to bed, and it was observed that these as well as the other inmates of the sick wards have all their special requirements fully met, and that their medical treatment is conducted with great ability. Exclusive of ward cleaners there are 65 men and 52 women registered as daily engaged in useful work.

The official registers were examined and found regularly and correctly kept.

GREENOCK PAROCHIAL ASYLUM,
26th August 1904.

Since the date of the previous report, 4th April 1904, the following changes in the population have occurred :—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
On register 4th April 1904, . .	120	114	234
Admitted, ...	15	10	25
Discharged recovered, . . .	6	5	11
Discharged unrecovered, . .	0	1	1
Died, ...	6	5	11
On register at this date, . . .	123	113	236

One man and 1 woman were absent on probation ; all the other patients were resident and were seen during the visit.

The deaths are registered as due to senile degeneration in 3 cases ; to tubercular affections in 3 cases ; and to the following causes in 1 case each, viz :—hæmorrhage from a wound in the throat self inflicted prior to admission ; epilepsy ; cerebral hæmorrhage ; exhaustion from acute melancholia and Bright's disease. *Post mortem* examinations were only made in two instances. This small number of autopsies is, it is hoped, exceptional and incidental, for such examinations are desirable in the interests of medical knowledge, and expedient as means for the detection of injuries which are not always discernible during life.

There are 13 entries in the Register of Restraint and Seclusion which refer to the restraint of 2 persons on account of violent conduct and the seclusion of 1 person for the same reason. There are no entries in the Register of Accidents. The Register of Minor Accidents, which contains an account of the origin of bruises and slight marks of injury, was examined.

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Greenock Parochial Asylum.

Since last visit the following changes have occurred among the attendants:— 5 men and 4 women have been engaged; 3 men and 4 women have resigned; and 1 man has died.

The movement of the population in this asylum is above the average of Scottish asylums. During the year 1903 the admissions were 34 per cent. of the average numbers resident, and the removals from all causes were also 34 per cent. of the numbers resident. The large number of patients admitted suffering from acute forms of mental affection is evident from the fact that the proportion of recoveries was 54 per cent., reckoned on the numbers admitted. Such a high recovery rate suggests that a considerable proportion of the admissions are cases of acute alcoholism. The fact remains, however, that the functions of the institution are largely those of a curative hospital. It is, therefore, the duty of the Committee to place at the disposal of their Medical Officers the best facilities for carrying on this most important part of their work. Although the institution is well managed, and although in material comforts the inmates are suitably provided for, the provisions for the hospital treatment of new and acute cases are not abreast of the standard of other and similar asylums in the country. Various suggestions have from time to time been made in previous reports as to this question. It has been suggested that a separate hospital should be built, also that homes for attendants and nurses should be erected with the view of setting free accommodation in the wards. In the preceding report an addition to the staff of nurses and attendants was very properly recommended. It seems, however, that the present state of the accommodation will not permit of an addition to the staff. The foregoing remarks are not made in a spirit of criticism, but with the object of inducing the Committee to consider the best means of advancing the efficiency of the institution by extending the accommodation for the hospital treatment of patients suffering from acute mental and physical disease and from bodily infirmities.

The asylum was found in excellent order, and all the apartments were clean and well ventilated. The beds were comfortable, and the bed coverings were clean and in good repair. The personal clothing of the patients was suitable, and bore evidence of being carefully attended to.

The behaviour of the patients during the visit was tranquil, and even in the ward where several of the more troublesome women reside there was neither noise nor excitement. A substantial dinner consisting of broth, salt fish with sauce and potatoes was served to-day. It was apparently enjoyed by the patients, and no reasonable objection could be made regarding its quality or its preparation.

The inmates of the sick wards receive suitable and satisfactory care so far as nursing and medical attendance are concerned, but it is understood that more accommodation for this class would be an advantage during those seasons of the year when sickness is more prevalent than it is at present.

The work of reconstructing the laundry has been begun; the old fittings have been completely removed and the extended area to be occupied by the new laundry is in process of being prepared.

The books and registers were examined and found correct.

PAISLEY PAROCHIAL ASYLUM, CRAW ROAD,
27th January, 1904.

Paisley Parochial Asylum, Craw Road.

The number of patients resident at this date is 78—31 males and 47 females. The asylum is licensed to contain 43 males and 53 females, and it will be seen that there is a considerable amount of vacant accommodation. Of those in residence 64 are chargeable to Paisley, 10 to Mearns, and 4 to Eaglesham.

Since last visit on 14th October 1903, 1 man and 5 women have been admitted, 1 man has been discharged unrecovered, and 1 man and 2 women have died. The causes of death are registered as abscess of parotid gland, senile decay, and pneumonia complicated with thrombosis. A *post mortem* examination was made in one instance, the consent of relatives being withheld in the other 2 cases.

The Register of Restraint and Seclusion contains no entry, and there has been no accident. One male patient escaped, and as he was absent for 28 days his name fell to be removed from the register. He is, however, known to be doing

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Paisley Parochial Asylum, Craw Road.

well. The only changes in the staff are the resignation of a nurse, and the appointment of another in her place.

All the wards were found clean, comfortably heated, and in their usual good order. The main staircase has been greatly improved by repainting, and by being supplied with a new stair carpet. Fireplaces of good design have been substituted for the old ones, which were antiquated and worn out. A valuable addition is in course of erection which is to contain an escape staircase which will serve every floor of the asylum. A handrail to this stair will increase its usefulness. The safety of the patients will in case of fire be better secured by this alternative exit. It was noted with satisfaction that fire buckets and hand pumps are liberally provided and conveniently located. Telephonic communication has been installed between all sections of the establishment, and also with the Governor's house. It is found to facilitate administration in many directions.

The condition of the inmates was highly satisfactory. They were free from complaint and their behaviour was quiet and orderly. Four women were confined to bed on account of the infirmities of old age, otherwise the general physique and health of the patients is good and indicative of an adequate dietary. The neatness and good quality of the clothing of both sexes always attract favourable attention. The dresses and outdoor garments of the women are made with exceptional care and good taste. The wearing of such clothing cannot fail to increase their self-respect and have a beneficial influence on their conduct. Industrial employment continues to be well attended to—27 men and 31 women are daily engaged in useful work. Twenty-three of the men are healthily employed on the land in connection with the asylum.

The registers were examined and found regularly and correctly kept.

PAISLEY PAROCHIAL ASYLUM, CRAW ROAD,
3rd and 12th November 1904.

There are 86 patients on the register of the asylum at this date. Of these, 38 are men and 48 are women. They were all resident except one man, who was absent on pass. Since the 27th January last, the date of the previous visit, 9 men and 3 women have been admitted and 2 women and 2 men have died.

The ages of those who died were respectively 65, 70, 75, and 83 years. The causes of death are registered as pneumonia in two cases, atheroma of the cerebral vessels in one case, and senile decay in one case.

There has been no escape, no accident, and no recourse to restraint or seclusion during the period covered by this report.

Four women were confined to bed suffering from chronic infirmities, but, with these exceptions, the general average health of the inmates was highly satisfactory. Twenty-six men are employed at work on the farm; these men were seen in their working clothes, which were neat and suitable for the purpose. Eight of the female patients were employed in the kitchen and laundry, and 14 were sewing or knitting. The dress of the female patients was neat and varied in design and colour.

There was no excitement among the patients and none of them offered to make any statement or complaint.

The wards and dormitories were found, as usual, in excellent order and scrupulously clean.

The new fire-escape staircase is now completed and affords an alternative exit in case of fire from all parts of the buildings which required provision of this kind. The staircase which passes from the top storey to the ground is built in as a projection from the building. The steps are broad and the ascent is easy. As recommended in last entry, a hand-rail has been provided on each side.

It is proposed to replace the present lavatories at the end of the large male and female dormitories respectively with modern sanitary fittings and to convert part of the space into bathrooms for the attendants. The general bathroom for patients is improved by the addition of a fireplace, which will have the effect of keeping it dry and increasing the comfort of the patients.

It is recommended that an additional female attendant should be engaged. There are at present 2 regular nurses for 48 patients, and although there are in addition a laundress, a sewing maid, and a hall maid, who relieve the

nurses when either of the latter is off duty, there are only two attendants usually on duty in the wards, one on each floor. In the event of an increased number of patients in the sick-room, which from time to time occurs, it is not at present possible to give the necessary amount of supervision and attention to the various classes of inmates.

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The books and registers were examined and found correct.

PAISLEY PAROCHIAL ASYLUM, RICCARTSBAR, *24th February* 1904.

Paisley Parochial Asylum, Riccartsbar.

There are 200 patients, 99 men and 101 women, on the register of the asylum at this date. All were seen in the course of the visit except 1 man who is absent by escape.

Since the date of previous report, 14th October 1903, the following changes in the population have taken place :—

	Pauper Patients.		
	M.	F.	TOTALS.
Admitted, ...	23	15	38
Discharged recovered, . . .	12	9	21
Discharged unrecovered, . . .	4	10	14
Died, ...	4	4	8

The recovery rate has, during the period under review, been high, being 55·2 per cent. on the admissions. Of the 14 patients discharged unrecovered, 2 were boarded out in rural districts, 2 were sent to the care of relatives, and 10 were transferred to other establishments. It is worthy of note that the percentage of patients discharged improved or unrecovered from this asylum to the care of related or unrelated guardians has during the last ten years been a high one, being 5·8, which is 1·3 per cent. higher than the average for all Scottish asylums. The boarding out of patients in rural districts has long been a praiseworthy feature in the parochial administration of Paisley, and the success which has attended this movement is greatly to the credit of the Inspector of Poor. The judicious boarding out of such patients is desirable from many points of view—it prevents undue accumulation and overcrowding of the asylum, and it gives the patients the opportunity of enjoying domestic surroundings and the employments of sane life. Of the 5·8 per cent. discharged unrecovered during the last ten years, 3·7 per cent. have been removed from the poor-roll, and 2·1 per cent. are maintained by the parish.

The deaths are registered as due to brain disease in 3 cases, to inflammatory chest affections in 2 cases, and to septic meningitis, cardiac failure, and phthisis pulmonalis in 1 case each. In 4 instances, or in 50 per cent. of the deaths, a *post mortem* examination was made. The fulness of the records of these examinations in the Pathological Journal, and the manner in which the case books are kept, show careful and intelligent attention to the medical work of the asylum.

During January and February of this year enteric fever attacked 3 male attendants, and they were sent to the Infectious Diseases Hospital. In one case the issue was a fatal one. Dr. Fraser has made full enquiry, but nothing could be ascertained to throw any light on the precise sources of infection. No patient has been affected, not even with ordinary gastric symptoms.

There are no entries in the Register of Restraint and Seclusion. Two accidents are recorded, a self-inflicted burn on the foot, and wounds on scalp and thigh; the latter were sustained by a maniacal patient while forcing himself through the window of the padded room. Two escapes have occurred, and one of the patients is still absent.

The changes in the staff are confined to the male attendants—4 have resigned and 5 have been engaged. For over a year there has been no change among the nurses, a fact which is indicative of tactful management in the female division. The staff for day duty comprises 1 to every 10 male, and 1 to every 11 female patients, and there are 2 attendants and 2 nurses engaged in night supervision.

Great tranquillity prevailed among both the male and female patients

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Paisley Parochial Asylum, Riccartsbar.

during the visit. Their aspect indicated a suitable and sufficient dietary, and their condition, in respect to personal tidiness and in the matter of clothing, was highly satisfactory. The medical care and treatment of those in the hospital sections is evidently of a high standard. The efficiency of the arrangements in the male and female hospital wards always attracts favourable attention. The large number employed in useful work shows that the general management is both painstaking and successful.

The dayrooms and dormitories were in good order, and the repainting of the wards has given them a cleaner and brighter appearance. The bedding was in a thoroughly satisfactory state, and wire mattresses are being substituted for worn-out straw palliasses. The dining hall stands greatly in need of renovation, and it is recommended that it be repainted and re decorated.

The laundry, kitchen, and scullery are not satisfactory departments. They are all too small for the work now devolving on them, they are not well lighted, not properly ventilated, and their arrangements and equipment are far behind what are required for efficiency and for the comfort and well-being of those employed in them. Nothing could have been more unsatisfactory than the state of the wash-house at this date ; it was full of steam, and its floor was flooded with water. The enlargement and reconstruction of the kitchen and scullery by taking in a considerable portion of the present laundry accommodation, and the erection of a new laundry and wash-house on a convenient site, are matters which the Asylum Committee are recommended to take into early consideration. There is no reserve boiler, which is an unsafe position for an asylum of this size.

The registers were examined and found written up to date and correctly kept.

PAISLEY PAROCHIAL ASYLUM, RICCARTSBAR,
3rd November 1904.

Since the date of previous report, 24th February 1904, the following changes in the population have taken place :—

	Pauper Patients.		
	M.	F.	TOTALS.
On Register 24th February 1904, . .	99	101	200
Admitted, ...	32	46	78
Discharged recovered, . . .	20	14	34
Discharged unrecovered, . . .	15	8	23
Died, ...	8	17	25
On Register at this date, . . .	88	108	196

All the patients on the register were resident, and were seen in the course of the visit.

The above figures show an active movement of the population over a period of a little over eight months. The number admitted, considering the average number resident, has been high, but not so high as the number removed from all causes. The recovery rate has been high, and the number discharged unrecovered shows that due attention is given to the removal of all patients for whom asylum treatment is not considered necessary. There are still some patients in the institution who are regarded as suitable for boarding out, and it is satisfactory to record that the disposal of these patients is at present engaging the attention of the parochial authorities.

The death-rate has been unusually high during the period covered by this report. Fortunately the deaths were, with one exception, due to natural and unpreventable causes. Six of the patients were over 70 years of age. Twelve of them were admitted during the eight months under review, and were in feeble health at the time of admission. The causes of death were verified by *post mortem* examination in 18 instances, or 72 per cent. of the whole. The following are the registered causes of the 25 deaths :—Senile decay, 6 cases ; exhaustion from acute mental disease with physical complications, 5 cases ; pneumonia, 3 cases ; heart disease, 2 cases ; peritonitis, 2 cases ; epilepsy, 2 cases ; and the following affections in one case each, namely, phthisis, diarrhœa, general paralysis, cancer, and supposed irritant poisoning. The last mentioned case was that of a woman admitted to the

asylum suffering from symptoms resembling those usually associated with irritant poisoning. She died a few hours after admission. A *post mortem* examination was made at the instance of the Procurator-Fiscal, but the result of the analysis of the contents of the stomach has not yet been learned.

There is one entry in the Register of Accidents which refers to a fracture of the arm in the case of a female patient, the circumstances of which are known, and do not appear to imply censure of those immediately in charge of the patient at the time of the accident.

The changes in the nursing staff are as follows :—Three men and 7 women resigned, 1 man was dismissed, and 3 men and 7 women were engaged. The changes among the female attendants have been more numerous than is desirable, but it is understood that the majority of those who resigned did so to enter upon more lucrative employment elsewhere.

The record of the employment of the patients shows that at the time of the visit 160 of them—79 men and 81 women—were working. This is a highly creditable proportion. Excluding those who are returned as working in the house, 50 men were engaged in garden and field labour, and 9 men in various trades. Of the women, 9 were working in the kitchen, 14 in the laundry, and 49 were sewing or knitting. The work of the male patients on the farm and garden is not only beneficial to themselves, but is, it is understood, remunerative to the institution. As the asylum shows signs of increasing its population, the question of the future extension of the arable land in connection with it should not be lost sight of by the Committee, more especially since, as is believed, a favourable opportunity for doing so has recently presented itself.

The health of the inmates was generally satisfactory. Three men and 10 women were confined to bed, the majority of these being newly-admitted patients suffering from acute mental symptoms. It is highly gratifying to observe that the importance of treating acute, newly-admitted patients, by rest in bed, is so fully recognised and practised in this asylum. This is, however, only one of the several instances wherein Dr. Fraser has successfully employed in the treatment of the insane those medical and hospital methods without which we can scarcely hope to advance the interests of the patients themselves or our own clinical knowledge. The male and female hospitals respectively presented an orderly and pleasing appearance ; the patients were quiet, the apartments nicely decorated, and the comfort of those patients who were able to be out of bed ensured in a variety of ways. By merely looking at the interior of these wards, with the nurses moving quietly about among the patients, it would be difficult to decide of what institution they formed parts, or what the inmates were suffering from. This is perhaps the highest commendation that can be given, for it has long been an ideal in asylum administration that the treatment of the acutely insane should be as far as possible identical with the treatment of ordinary patients in the wards of general hospitals.

The asylum was found in good order throughout its various divisions, with the exception of the laundry and kitchen departments, which still stand in need of restoration. Operations have been begun in the kitchen for the construction of a service window and hot plate between it and the dining-hall. The latter apartment is in process of being repainted.

It is suggested for the consideration of the Committee that the substitution of electric for gas lighting would add to the safety and promote the cleanliness of the institution ; electric lighting is, besides, more sanitary, and for medical purposes it is incomparably more useful. The large majority of asylums in this country now employ it exclusively.

The books and registers were examined and found correct.

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Commissioners' Entries.

Lunatic Wards of Poorhouses.

Aberdeen East Poorhouse.

LUNATIC WARDS OF POORHOUSES.

LUNATIC WARDS, ABERDEEN EAST POORHOUSE,
9th February 1904.

On the 17th July 1903, when these wards were last visited, there were 82 patient—44 men and 38 women—resident. Since then 10 women have been admitted; 2 men and 2 women have been discharged; the resident number is therefore 88, of whom 42 are men and 46 are women.

There has been no death, accident, or escape since last visit. There is no entry in the Register of Restraint and Seclusion.

As regards food, clothing, lodging, and comfort, the patients were found in the same satisfactory condition as will be found favourably commented upon in previous reports.

With the exception of one man who appealed for release, and whose case is being enquired into, there were no complaints.

The books and registers were examined and found correct.

Aberdeen West Poorhouse.

LUNATIC WARDS, ABERDEEN WEST POORHOUSE,
9th February 1904.

There are 56 patients, 29 men and 27 women, resident in the wards at this date. Since the 17th July 1903, when the wards were last visited, 5 men and 3 women have been admitted, 1 man has been discharged, and 2 men and 2 women have died.

The deaths are registered as due to phthisis in 2 cases, and to cirrhosis of the liver in 2 cases. *Post mortem* examinations were made in each instance. One patient escaped and was absent for at least one night before being brought back. There are no entries in the Register of Accidents or in the Register of Restraint and Seclusion.

The mental and physical condition of the patients was satisfactory, and they bore evidence of being properly fed and suitably provided for.

The various dayrooms and dormitories were as usual found clean, bright, well aired, and in good order.

The books and registers were examined and found to be regularly and correctly kept.

Buchan Poorhouse.

LUNATIC WARDS, BUCHAN POORHOUSE,
6th February 1904.

There are 26 men and 26 women in the wards at this date. Since July 16th, 1903, when the wards were last visited, 1 man and 1 woman have been admitted, and 1 woman was discharged.

The patients were found in a satisfactory state of bodily health; only 1 woman was confined to bed with a slight and transitory ailment. There has been an absence of any serious ailment among the inmates during the period covered by this report. The patients all manifested the appearance of a regular, suitable, and nutritious dietary, which probably accounts in great measure for the uniform standard of good health which always prevails among them. The dinner to-day consisted of excellent broth and cold fresh beef. The articles of this meal were properly cooked and of good quality. The quality of the various articles of food in the stores, such as milk, oatmeal, cheese, &c., could not be taken exception to. The provision and clothing stores are kept clean and in admirable order.

The highly satisfactory state of the patients' bedding and personal clothing, and the cleanliness and good order of the dayrooms and dormitories, which have been so often referred to in former reports, continue to deserve commendation.

The books and registers were examined and found correct.

LUNATIC WARDS, BUCHAN POORHOUSE,
6th October 1904.

There are 26 men and 26 women in residence at this date.

Since 6th February 1904, the date of previous visit, 3 men and 2 women have been admitted, and 3 men and 2 women have been discharged. There has been no death. Of the 5 patients discharged, 2 were boarded out in private dwellings, and 3 were transferred to the Aberdeen Royal Asylum on account of having become unsuitable for treatment in an establishment of this kind.

One accident is recorded, but it was slight in character. No escape has taken place, and there has been no change in the staff.

The personal condition of the patients was highly satisfactory; their clothing was in excellent order, and its variety, neatness, and good quality merit commendation; their health and physical condition indicated an adequate dietary and sufficient time spent out of doors; they were free from complaints and had every appearance of being contented and comfortable. Twenty-one men and 17 women are daily engaged in useful occupations—19 of the men work on the land in connection with the Poorhouse, and it is pleasing to note that this employment is not only beneficial to themselves but is also a source of profit to the establishment. For the year ending 1st May 1904 the land yielded a profit of £112 7s 1d.

The day-rooms and dormitories were scrupulously clean and their aspect was one of brightness and comfort. The two male dormitories have been tastefully repainted, the work having been done by the Poorhouse staff, and new furnishings, such as oilcloth for the stair and landing and curtains for the windows, have been provided. The bedding is ample for the season and well attended to. The good order of the whole establishment always attracts favourable notice.

The registers were examined and found accurately and neatly kept.

LUNATIC WARDS, CUNNINGHAME POORHOUSE,
28th March 1904.

There are 47 men and 48 women resident as patients in the wards at this date.

Since 23rd July 1903, the date of previous visit, 1 man and 4 women have been admitted, 2 women have been discharged, and 2 men and 2 women have died. Of the 5 admitted, 3 were transfered from the District Asylum, 1 from the ordinary wards, and 1 from a private abode. The deaths are registered as due to senile debility in 2 cases, to cardiac disease in 1 case, and to acute phthisis pulmonalis in 1 case. In the case of only one death was the cause verified by a *post mortem* examination.

Three accidents are recorded, two of which were of a trifling character and one involved a fracture of one of the bones of the right forearm due to slipping on a polished floor. There has been no escape, and no change in the staff.

Four women were confined to bed; otherwise the health and bodily condition of the patients were, generally speaking, satisfactory and indicative of a suitable dietary. Everything seen during the visit disclosed a kindly, considerate, and judicious treatment of the inmates. The laundry continues to prove of great value iu the employment of the women, and it is a source of profit to the ratepayers. It is understood with approval that the laundry workers are supplied with lunch, and that certain small sums received for work done are expended on extras as rewards for their industry. Forty one, or 87 per cent., of the men are registered as daily employed in useful work.

Attention is again drawn to the dirty and insanitary condition of the walls of many of the rooms. Their repainting is greatly required, and the delay in giving effect to the former recommendations in this matter is not satisfactory. As it has been ascertained that the floor of the dormitory lavatories are unsuited for tiling, it is recommended that linoleum of good quality be laid, which if varnished, waxed, and polished will be impervious to water. The water-closet in the female lavatory should be enclosed by a wooden screen. Fire buckets should be provided throughout the wards; if conveniently placed and kept full, they are of great service in the first moments of a fire.

The registers were examined and found written up to date and correctly kept.

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Cunninghame Poorhouse.

LUNATIC WARDS, CUNNINGHAME POORHOUSE,
12*th July* 1904.

There are 47 men and 46 women in the wards at this date. The only changes in the population since the 23rd March of this year, the date of last visit, have been the deaths of two female patients. These deaths are registered as due to apoplexy in the one case and to senile debility in the other. A *post mortem* examination was made in one instance.

One man and 1 woman were confined to bed on account of chronic ailments. The general health of the other patients was highly satisfactory. They are evidently much in the open air; they had every appearance of being suitably and regularly fed; and they enjoy a great amount of personal liberty within the grounds of the institution. A very large proportion of the inmates are usefully employed. Sixteen men were working in the garden and 16 women in the laundry at the time of the visit. There are only 6 men and 9 women who, on account of mental or physical incapacity, are not daily employed in some kind of occupation. It was satisfactory to observe the general contentment of the patients with their care and surroundings.

The grounds around the institution are kept in excellent order, and the large garden was plentifully stocked with vegetables of every description. It is understood that estimates have been obtained for the repainting of the wards and dormitories, and the work will be proceeded with as soon as the Committee have decided upon a contractor. It is also understood that the work of laying linoleum upon the floors of the dormitory lavatories is about to be proceeded with.

The various wards and dormitories were properly aired and in good order.

The books and registers were examined and found correct.

Dumbarton Poorhouse.

LUNATIC WARDS, DUMBARTON POORHOUSE,
18*th January* 1904.

There are 57 patients at present in the wards, 28 men and 29 women.

Since 6th July, 1903, the date of last visit, 6 men have been admitted, 1 man has been discharged recovered, 3 men have been transferred to the asylum, 1 man and 1 woman have been boarded out, and 2 men and 1 woman have died.

The causes of death are registered as general debility, senile decay, and chronic Bright's disease. A *post mortem* examination was made in 1 case, the consent of the relatives being withheld in the other 2 cases.

No accident has occurred, and there has been no escape. A female attendant has resigned, and one has been appointed in her stead.

The condition of the wards was most satisfactory. The plaster work which has been injured by damp is in progress of being renewed. The dayrooms and dormitories have been greatly improved by repainting and tasteful redecoration, and it was noted with approval that the bareness of their walls is now relieved with pleasing pictures. The steps of the staircase in the female division have been efficiently repaired. The beds and bedding were in excellent order, and the wire mattresses are being provided with canvas coverings. The fire buckets were found full and conveniently situated. There is telephonic communication between the poorhouse and the Dumbarton Fire Station.

One patient was confined to bed by a temporary ailment. With this exception the inmates were in good health and had every appearance of being well fed and satisfactorily cared for. Both the men and women were suitably and comfortably clothed, and personal cleanliness is evidently well attended to. The dinner was an ample meal, of which appreciation was expressed by the more intelligent patients. A very satisfactory feature in the management is the large number industrially employed—26 of the 28 men, and 22 of the 29 women are regularly engaged in useful work. Twenty-one men are daily employed on the 35 acres of land rented by the Committee, which is both beneficial to themselves and remunerative to the establishment.

The books and registers are accurately and neatly kept.

LUNATIC WARDS, DUMBARTON POORHOUSE,
25th July 1904.

Dumbarton Poorhouse.

There are 56 patients, 28 men and 28 women, resident in the wards at this date. Since the 18th of January, when the wards were last visited, 3 men and 1 woman have been admitted, 1 woman has been discharged recovered, 2 men and 1 woman have been discharged unrecovered, and 1 man has died. The cause of death in this case is registered as general paralysis. No *post mortem* examination was held, for the reason that the friends of the deceased refused to consent to it. There are no entries in the Register of Accidents.

The health of the inmates was satisfactory. None of them appeared to be weakly or ailing, and no patient was confined to bed. The neatness and cleanliness of the dress of the patients was particularly noticeable. It was also observed that they all appeared to be happy and contented with the exception of two women who believe that they should not be detained under care, but who are nevertheless unfit for ordinary life outside an institution.

The various wards and dormitories were found in good order and scrupulously clean. The new pictures on the walls of these apartments have added to their cheerfulness and homelike appearance. The plots of garden ground opening off the wards on each side are well kept and afford a pleasant recreation ground for the patients.

With the exception of 3 men and 8 women, who are physically unfit for work, all the patients were industrially employed at the time of the visit.

The books and registers were examined and found correct.

LUNATIC WARDS, DUNDEE EAST POORHOUSE,
19th March 1904.

Dundee East Poorhouse.

Since the 22nd July 1903, when the wards were last visited, 1 man and 7 women have been admitted, 4 men have been discharged, and 1 man and 8 women have died. There are 91 patients—43 men and 48 women—resident at this date.

The deaths are registered as due to gross brain disease in 2 cases, to disease of the lungs in 2 cases, and to senile decay, gangrene, tuberculosis, cancer, and suicide by precipitation in one case each. *Post mortem* examinations were made in six instances.

The death from suicide occurred in the case of a male patient who jumped through a dormitory window on the night of the 7th August last. The patient was not suspected of having any suicidal tendency and, consequently, no precautionary measures were considered necessary in his case. The occurrence, however regrettable, must be regarded as one of those impulsive actions which from time to time are apt to be manifested by insane persons, and which are often unpreventable because they are unforeseen.

The employment of the patients is well attended to. At this date, 29 men and 34 women were engaged in various useful occupations. Among other employments it may be mentioned that 14 men were working in the garden and 16 women in the laundry.

The health of the inmates was in every respect satisfactory, only 2 persons, a man and a woman, being confined to bed. The patients had every appearance of being suitably fed and their personal clothing was suitable and in good repair.

The dayrooms and dormitories were in excellent order. The female division is being repainted, which gives it a bright and cheerful appearance.

The patients were quiet and orderly, and no complaint of a rational nature was made by any of them.

The books and registers were examined and found correct.

LUNATIC WARDS, DUNEEE EAST POORHOUSE,
11*th August* 1904.

There are 92 patients, 45 men and 47 women, in residence at this date.

Since last visit on 19th March 1904, 3 men and 1 woman have been admitted, 1 woman has been discharged recovered, and 1 man and 1 woman have died. The causes of the deaths are registered as softening of the brain and bronchitis, followed by cardiac failure. Consent to *post mortem* examination was unobtainable.

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Dundee East Poorhouse.

No patient has sustained any injury, and there has been no escape. The changes in the staff consist of the resignation and appointment of two nurses.

The personal condition and clothing of the patients were on the whole satisfactory. The general health is good, only 2 men being confined to bed. There were no complaints, and, except a few appeals for discharge, the inmates were contented and orderly in behaviour. Their industrial occupation is well attended to: 14 men are engaged in healthy outdoor work on the land in connection with the establishment, and useful employments are found for other 15 men. The laundry provides work for 15 women, and ward cleaning, sewing, and knitting employ other 18 women. Seven men and 6 women are from time to time granted leave of absence for an afternoon to visit relatives, a privilege which, it was evident, is much appreciated.

The wards were in good order; the floors of the female dayroom and dining-hall are much worn and very dingy, which detract from the otherwise clean and cheerful appearance of these rooms. The dormitories have been repainted, and their aspect was highly satisfactory. The beds are well furnished with coverings. An alternative exit from the dormitory floor is practicable through the door leading to the ordinary wards, the key of which is in possession of those on night duty.

The registers were examined and found correctly kept.

Dundee West Poorhouse.

LUNATIC WARDS, DUNDEE WEST POORHOUSE,
17*th March* 1904.

There are 65 patients—31 men and 34 women—in the wards at this date. Since the 22nd July 1903, when the wards were last visited, 1 man has been admitted, 2 men and 1 women have been discharged, and 2 men and 1 woman have died. The deaths are registered as due to phlebitis, to disease of the heart and arteries, and to cancer of the stomach. A *post mortem* examination was made in one instance.

There has been no casualty or any incident affecting the inmates which calls for notice since the date of last visit. The patients were quiet and orderly, and, with the exception of one female patient who demanded release on the ground that she is not insane, they made no complaints of any kind. Their general health was satisfactory, only one female patient being confined to bed.

The various dayrooms and dormitories were clean and, so far as that is possible, in good order.

It is again recommended that the built-up door between the female dormitory and the dining-room should be repaired, so as to form an alternative exit from the female ward in the event of fire. It is believed that this could be done without interfering with the seats in the dining-room. The present means of exit from the female dormitories are inadequate.

The books and registers were examined and found correct.

LUNATIC WARDS, DUNDEE WEST POORHOUSE,
11*th August* 1904.

There are 62 patients—31 men and 31 women—resident in the wards at this date.

Since 17th March 1904, the date of last visit, no patient has been admitted, 1 woman has been discharged recovered, 1 woman has been transferred to the district asylum, and 1 woman has died. The death is registered as due to acute nephritis. The consent of relatives to a *post mortem* examination was withheld.

No accident has occurred. A male patient escaped and was absent for 6 days before being brought back. Two members of the staff have resigned, and 2 have been engaged in their stead.

Two female patients were removed during the visit to be boarded out in a rural home, and 4 others are soon to be similarly provided for. It is understood that the Parish Council have resolved to discontinue the wards, as their accommodation is required for ordinary paupers.

The patients were found in a satisfactory condition as to personal cleanliness and neatness of clothing. Four women were confined to bed, chiefly owing to the infirmities of old age. The general health of the inmates was otherwise

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good. Employment is duly attended to; 17 men were seen engaged in sawing, splitting, and bundling firewood, 5 work in the garden and grounds, and 5 assist in keeping the wards in order. Twenty-seven out of 31 women are usefully employed—11 in the laundry and 16 at occupations suited to them.

The dayrooms and dormitories were in good order. Repainting is in progress. Many of the straw palliasses are in such an unsatisfactory condition that they should be condemned as unfit for further use and wire mattresses substituted.

The registers were examined and found regularly and correctly kept.

Edinburgh Poorhouse, Craiglockhart.

LUNATIC WARDS, EDINBURGH POORHOUSE, CRAIGLOCKHART, *26th February and 1st March* 1904.

On the latter date there were 225 patients, 138 men and 87 women, in these wards. Of this number 49 men and 15 women are at Middleton Hall.

Since the 29th August 1903, when the wards were last visited, 9 men and 7 women have been admitted, 6 men and 4 women have been discharged, and 4 men and 1 woman have died.

The deaths are registered as due to cerebral hæmorrhage in 2 cases, and to the following diseases in 1 case each, namely—chronic pleurisy, pulmonary congestion, and enteritis. *Post mortem* examinations were made in all instances except one in which the consent of the relatives was refused. There has been no accident of a serious kind, no recourse to the seclusion or restraint of a patient, and no escape since last visit. The following changes have taken place in the nursing staff:—2 men and 4 women have resigned, and 1 man has been dismissed.

The patients at Craiglockhart, notwithstanding their number, and the fact that a certain proportion of them are acute cases, were on the whole quiet and orderly during the visit. Their general health was as satisfactory as could be expected, and only 6 of them were confined to bed, and those on account of constitutional debility or slight aliments. The dayrooms were more crowded than desirable, but this condition must, in the circumstances, be accepted as impossible of remedy. Several patients, both men and women, made appeals for release, but they were patients who were manifestly unsuitable for discharge and whose cases had been previously considered. The dormitories were clean and in good order, the bedding was comfortable, and the rooms properly aired.

The patients at Middleton Hall were found in good health, suitably dressed, and properly fed. The dinner on the day of the visit, 26th February, consisted of broth, bread, salt fish with sauce, and potatoes. There was an ample quantity for each patient, and the food was properly cooked and neatly served. The patients were remarkably contented.

Three comfortable easy chairs were seen in the male dayroom, and it is understood that they were put there at the suggestion of a member of the Parish Council. They form a much appreciated addition to the furnishing; as there are several patients who are not physically robust among the men it would certainly be a kindness to increase the number of these chairs.

The books and registers were examined and found correct.

LUNATIC WARDS, EDINBURGH POORHOUSE, CRAIGLOCKHART, *1st August* 1904.

There are at this date 138 men and 87 women, 225 patients in all, on the register of the wards. Of these, 88 men and 71 women are at Craiglockhart, and 50 men and 15 women at Middleton Hall. One woman is absent on probation.

Since last visit, on 26th February 1904, the following changes in the population have taken place:—10 men and 5 women have been admitted, 1 man has been discharged recovered, 7 men and 3 women have been discharged unrecovered, and 2 men and 2 women have died. Of the 10 patients discharged unrecovered or improved, 4 have been boarded out in rural districts, 2 have been sent to the care of relatives, 3 have been transferred to the Royal Edinburgh Asylum, and 1 was removed from the register after an absence of 28 days by escape.

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The deaths are registered as due to cardiac disease in 2 cases, to bronchitis and hypostatic pneumonia in 1 case, and to general tuberculosis in 1 case. In every instance a *post mortem* examination was made, a fact which is creditable to those in medical charge of the wards.

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Edinburgh Poorhouse, Craiglockhart.

One casualty to a patient is recorded, but it was not of a serious character. Two escapes have occurred, one of which was permanent, and one in which the patient was absent for over 2 days before being brought back. The changes among the staff consist of the resignation of 1 nurse, the dismissal of 3 attendants, and the appointment of 5 attendants and 1 nurse. The day staff at Craiglockhart comprises 6 attendants and 6 nurses, which gives a proportion of 1 to 14 patients. There is 1 night male attendant, and the arrangements for the night supervision of the epileptic inmates appear to be satisfactory. Special wire mattresses with wire borders have been provided for this class of patients. Middleton Hall is adequately staffed in view of the harmless and easily-managed patients resident there.

The inmates of the two establishments, Craiglockhart and Middleton Hall, were found in a condition which indicated satisfactory care and considerate treatment.

There were no complaints calling for comment, and the patients were, with the exception of the few who appealed for discharge, unusually contented.

The general health is good, only 2 men and 1 woman being confined to bed. The clothing of both sexes was suitable and neat in appearance, that of the women being especially so. The dinner served during the visit was a substantial and evidently a popular meal.

The high proportion of patients daily employed in useful work bears testimony to the energy of the management. Thirty-three men at Craiglockhart and 32 at Middleton Hall are engaged at healthy outdoor work on the grounds and garden. The grounds at Middleton Hall attracted favourable attention on account of the admirable way in which they are kept.

A favourable report can be given of the condition of the wards and dormitories, and also of the bedding. All were clean and in good order. The recommendation contained in the previous report to increase the number of easy-chairs in the men's dayroom at Middleton Hall is repeated—or what would be equally satisfactory is a couple of good-sized sofas. These would provide comfortably for senile and weakly patients and for those who need a restful seat after the day's work is over.

The registers were examined and found correctly and regularly kept.

Govan Poorhouse.

LUNATIC WARDS, GOVAN POORHOUSE,
26th March 1904.

There are 188 patients—97 men and 91 women—in residence at this date. There are vacant beds for 3 men and 9 women, but it is understood that efforts are about to be made to have them occupied.

Since 27th November 1903, the date of last visit, 1 man has been admitted, 1 man and 1 woman have been discharged, and 2 men and 2 women have died. Of the 2 discharged, 1 was sent back to the asylum and 1 was transferred to care in a private dwelling. The deaths are registered as due to brain lesions in 2 cases, to consumption in 1 case, and to pneumonia in 1 case. The consent of relatives to a *post mortem* examination was withheld in 3 cases; in the case of a recent death it is about to be made.

There is 1 entry in the Register of Accidents, referring to bruises found on a female patient, due, it is strongly suspected, to rough usage from the night nurse, who was summarily dismissed. The matter was reported to the Procurator-Fiscal, who, on investigation, did not obtain sufficient evidence to warrant a prosecution. There has been no escape.

The changes in the staff, in addition to the dismissal referred to are as follows:—1 attendant and 1 nurse have resigned, and 1 attendant and 2 nurses have been engaged.

The general appearance of the patients was highly satisfactory. They were suitably and neatly clothed and clean in their persons; with few exceptions, on the female side, they were quiet and well behaved, and there were no complaints calling for mention. On the whole their physical condition was good and indicative of an adequate dietary. The dinner at this date consisted of potato soup, boiled beef, and potatoes; it was a palat-

able and substantial meal, and its service is to be commended for its orderliness. The number employed in useful work is 80 men and 77 women, or 83 per cent. of the total inmates, which shows that occupation, a valuable and important factor in their treatment, is well attended to.

The accommodation which the reconstructed wards provide is of an excellent character. The 2 main dayrooms with their abundance of space, with their brightness and cheerfulness, and with their comfortable furniture and pleasing furnishings cannot fail to have beneficial effects on the conduct and health of the patients. The cleanliness and good order of the whole establishment merits unstinted praise. The kitchen has been tiled, and it has been excellently equipped with cooking boilers of the latest and best design. The laundry is the department which should next engage the attention of the Committee; it is evidently far too small for the work now devolving on it, and all its arrangements seem to be somewhat antiquated. The locks of the wards require overhauling—during the visit it was found impossible to unlock one in a dormitory door. A few fire buckets would be a useful addition to the fire-extinguishing apparatus if kept full, as they should be. They are ready for instant use, and every body can handle them.

The registers were examined and found correctly kept and written up to date.

LUNATIC WARDS, GOVAN POORHOUSE,
23*rd August* 1904.

There are at this date 199 patients—100 men and 99 women—on the register of the institution, all of whom are resident and were seen in the course of the visit. Since the 26th of March of the present year, the date of last visit, 8 men and 8 women have been admitted, 2 men have been discharged, and 3 men have died. In the period covered by this report there has been an actual increase of 11 patients.

The deaths are registered as due to gross cerebral disease in 2 cases and to heart disease in 1 case. *Post mortem* examinations were held in each instance.

The record of the employment of the patients shows that every inmate of the wards who is not incapacitated by physical weakness or mental disease (with the exception of 2 men and 1 woman who refuse to work) are engaged daily in useful work. Fifty-one men were to-day working on the land attached to the institution, 53 women were knitting or sewing, and the others were employed at household work, trades, and various minor employments.

There are no entries in the Register of Accidents or in the Register of Restraint and Seclusion.

Exclusive of head attendants, the staff of attendants consists of 7 men and 7 women for day duty, and 1 man and 1 woman for night duty. This gives 1 attendant for about 14 patients during the day, which, for the type of patient in the wards, ought to be sufficient. The changes among the members of the staff have been as follows:—5 men and 3 women resigned voluntarily, all of the men to enter more lucrative situations. A corresponding number of new attendants were engaged.

The health of the patients was highly satisfactory. They had a well-nourished appearance and looked as if they passed a sufficient portion of their time in the open air. Five patients were confined to bed suffering from chronic ailments, and 21 patients—10 men and 11 women—are in comparatively poor physical health. During the visit an excellent dinner was served in the dining-hall. It consisted of broth, bread, boiled beef, and potatoes. The food was of good quality, properly cooked, and liberal in quantity. There was an absolute absence of noise or excitement in the dining-room and in the wards. The patients as a whole were unusually contented, and expressed no complaints of any kind, with the exception of 2 men, who thought there was no necessity for their detention. Both men were manifestly insane. The dress of the inmates of both sexes was, without exception, neat, clean, and well-fitting.

The day-rooms and dormitories were in excellent order and scrupulously clean. The furnishings and decorations give to the apartments a bright and cheerful appearance, and the ventilation of all the rooms is carefully attended

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to. On the whole, the impression left after inspection was a highly favourable and pleasing one.

The wards are admirably constructed for the class of patients who occupy them, and the management is evidently thorough and effective.

The books and registers were examined and found correct.

Inveresk Poorhouse.

LUNATIC WARDS, INVERESK COMBINATION POORHOUSE,
2nd March 1904.

There are 31 patients, 16 men and 15 women, in the wards at this date. Since the 27th August 1903, when the wards were last visited, 1 man has been admitted and 1 woman has been discharged. There has been no death. There is no entry in the Register of Accidents, and no patient has been secluded or mechanically restrained. There has been no escape. There has been no change in the staff.

The patients were quiet and contented. Those of them who were spoken to professed themselves to be satisfied with the care and attention they receive. Their general health was satisfactory, and none of them was confined to bed.

The wards were found in good order, clean, well aired, and properly warmed. It is understood that there is still a great scarcity of water. It is therefore useless to recommend, at present, any addition to the water supply to the sculleries off the wards, but when a new supply is obtained, as is expected, it is hoped that the Committee will consider the advisability of introducing hot water into these apartments.

The books and registers were examined and found correct.

LUNATIC WARDS, INVERESK COMBINATION POORHOUSE,
27th July 1904.

There are 16 men and 14 women, 30 patients in all, on the register of the wards at this date. One man is absent by escape, and, as he has also run away on two occasions quite recently and caused considerable expense in his recapture, his transfer to an asylum is recommended. Such a case is unsuitable for an establishment of this kind.

Since last visit 1 woman has been sent to an asylum—an epileptic who had become excited and unmanageable. There has been no admission and no death.

No casualty has occurred to any patient, and the staff remains the same as at last visit.

A male patient was confined to bed, and as his illness is believed to be due to serious organic disease his removal to the hospital wards of an asylum may sooner or later be found to be necessary. With this exception the inmates were in good physical health, and their general condition was indicative of an adequate dietary and of abundant time spent in the open air. The dinner at this date consisted of broth, bread, boiled beef, and a vegetable. It was noted with approval that the use of fresh vegetables is a liberal one, as it secures a proper variation in the dietary and a sufficiency of antiscorbutic food. The clothing and personal cleanliness of both sexes were highly satisfactory. Industrial occupation is well attended to—13 men and 10 women being usefully employed. Six men work daily in the large garden in connection with the wards.

The living and sleeping rooms were scrupulously clean and in excellent order. The majority of the straw palliasses are old and of doubtful sanitary condition, and it is therefore understood with satisfaction that they are soon to be replaced by wire mattresses. The stairs have been provided with handrails, which are found to be most helpful to senile patients. The wards continue to be well managed.

The registers were examined and found to be correctly kept.

Kincardine Poorhouse.

LUNATIC WARDS, KINCARDINE POORHOUSE,
10th February 1904.

There are 42 patients, 21 men and 21 women, in the wards at this date. Since the 15th July 1903, the date of last visit, 2 men and 1 woman have

been admitted, 2 men have been discharged, and 1 woman has died. The death is registered as due to chronic bronchitis.

There has been no accident or escape or any incident requiring notice since last visit.

The patients were found in good health, with the exception of one or two of the older men, who are failing in strength on account of advancing years. Dinner was proceeding at the time of the visit. It was an ample meal, consisting of soup, salt fish, and suet pudding; the food was palatable, and appeared to be relished by the inmates.

The dayrooms and dormitories were clean and in good order. A considerable amount of painting done during the summer and autumn months has added to the appearance of the interior of the apartments.

The books and registers were examined and found correct.

LUNATIC WARDS, KINCARDINE POORHOUSE,
6th October 1904.

There are 20 men and 22 women in the wards at this date.

Since last visit, on the 10th February 1904, 4 men and 2 women have been admitted, 1 man has been discharged recovered and placed in the ordinary wards, 2 men and 1 woman have been transferred to the asylum, and 2 men have died. The deaths are registered as due to heart disease and acute peritonitis. In 1 case the cause of death was verified by a *post mortem* examination, and in the other case the consent of the relatives to an autopsy was withheld.

There has been neither accident nor escape during the period embraced in this report. A nurse and an attendant have resigned, and their places have been filled.

The patients continue to be carefully attended to; they were well dressed and their personal neatness was satisfactory. They are well nourished, and their complexions show that sufficient time is spent in the open air. The clothing for Sunday and special occasions is of good quality, varied as to material, and well made. The majority of the inmates are engaged in active, healthy, and useful work which conduces to their physical wellbeing and contentment. Much good sense and kindliness are evident in the treatment of the patients and in the management of the establishment.

The wards are maintained in excellent order and were throughout scrupulously clean. The day-rooms have been greatly improved in appearance by repainting. The recommendation contained in a previous entry that the straw palliasses, which are not in a satisfactory condition, be replaced by wire mattresses is again made. Fire buckets are provided for the dormitory floor, but there are none on the ground floor. This deficiency in the fire-extinguishing arrangements should at once be attended to.

The registers were found regularly and accurately kept.

LUNATIC WARDS, LINLITHGOW POORHOUSE,
19th January 1904.

There are at this date 17 men and 17 women resident in the wards.

Since 27th October 1903, 2 men have been admitted, 1 man and 1 woman have been discharged, and 2 men have died.

The deaths are registered as due to peritonitis from perforation of a gastric ulcer, and to cardiac failure from hæmorrhage. In 1 instance the cause was verified by a *post-mortem* examination. There has been no accident, and no case of escape. There has been no change in the staff.

The condition of the wards continues to show evidences of successful management. The dayrooms and dormitories were scrupulously clean, and their aspect was one of comfort and good order. The female dayroom has been repainted in a bright and pleasing colour. It was noted with approval that the supply of fire buckets is a liberal one, and that easily handled extincteurs have been added to the fire-extinguishing appliances.

The patients are, it was evident, treated in a liberal and kindly manner; they are free from irksome discipline, and no effort seems to be spared to make them happy and contented. Their clothing was neat and comfortable

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and the dresses and outdoor garments of the women are well made, varied in material, and of good quality. In this way the self-respect of the patients is increased. The dinner was a good and substantial meal. Thirty-one out of the 34 inmates are daily engaged in useful work.

Lunatic Wards of Poorhouses.

It is recommended that A. L. be returned to the asylum. He is permanently disabled by loss of both his hands, and he therefore requires more attention than can be given him by the one attendant, who has the charge of seventeen patients.

Linlithgow Poorhouse.

The books and registers were found accurately and neatly kept.

LUNATIC WARDS, LINLITHGOW POORHOUSE,
27*th July* 1904.

There are 20 men and 16 women resident in the wards at this date.

Since the wards were last visited, on the 19th January of the present year, 4 men have been admitted, 1 man has been discharged, and 1 woman has died. This death, which occurred in the case of a female patient, seventy-six years of age, is attributed to senile decay and cardiac failure.

There has been no accident to any of the patients in the period covered by this report.

Everything that was seen in the course of the visit went towards confirming the favourable impressions that have from time to time been expressed regarding the management of the wards in previous reports.

The patients were found in good health, and all, with the exception of one man and one woman, who are physically unfit for work, were usefully employed.

They were cheerful and contented; they exhibited all the appearances of receiving regular and suitable food; and their personal clothing was neat and in proper order.

The dayrooms, dormitories, and storerooms were found clean and in excellent order.

A male patient named A. R. is reported to be noisy at night, and to disturb the sleep of the other men who occupy the same dormitory. As there is only one dormitory, and no means of isolating a case of this kind, it is manifest that his continued residence must be a source of annoyance to his fellows, and his removal to the asylum is therefore recommended.

The books and registers were examined and found correct.

Old Monkland Poorhouse.

LUNATIC WARDS, OLD MONKLAND POORHOUSE,
21*st January* 1904.

There are in residence at this date 50 patients, 25 men and 25 women.

Since last visit 1 man has been admitted. No patient has been discharged, and there has been no death.

No accident or escape has occurred. An attendant has been dismissed for intemperance and disorderly conduct, and one has been engaged in his stead.

The wards were found in excellent order, scrupulously clean, and comfortably furnished. The walls of several rooms are devoid of pictures, and it would be an improvement if pleasing prints, suitably framed, were provided. It is understood that additional linoleum is to be laid on the floor of the male dayroom. It is recommended that fire buckets be supplied to each division of the wards. If kept full, as they should, they can be made to render important service at the first outbreak of a fire. All similar establishments are equipped with fire buckets.

Everything seen during the visit was indicative of careful and judicious management. The patients are abundantly provided with food of good quality, they are suitably and adequately clothed, and their employment in useful work is well attended to.

It is noted with pleasure that the Committee have by a substantial increase of salary recognised the conscientiousness, tact, and ability which characterise the Governor's performance of his duties.

The books and registers were examined and found correctly kept.

LUNATIC WARDS. OLD MONKLAND POORHOUSE, *26th July* 1904.

Old Monkland Poorhouse.

The number of patients in the wards, 25 men and 25 women, remains the same as at the last visit on 21st January of the present year, but in the interval the following changes have occurred:—3 women have been admitted, 2 women have been discharged, and 1 woman has died. The cause of death is registered as senile debility complicated by diarrhœa. A *post mortem* examination was not held, because of an objection to it on the part of the relatives. There has been no accident or escape, and no patient has been restrained or secluded. A female attendant resigned, and another has been appointed in her place.

All the dayrooms and dormitories have been repainted, and these apartments presented a bright and cheerful appearance. The floors of the dayrooms and dining-rooms on both sides have been covered with linoleum. Pictures of a suitable size have been hung on the walls of the dormitories, which relieve their bareness and add a furnished and pleasant appearance to the rooms. These slight alterations and improvements are cordially commended, not only as being beneficial in themselves but because they show a desire on the part of the Committee and the Governor to maintain the comparatively high position of these lunatic wards and the welfare of their inmates.

The healthy appearance of the patients, the good state of their personal clothing, and the scrupulous cleanliness of the bed-coverings were all taken as evidence of good, conscientious care. An abundant and well-cooked dinner was served to the patients in the wards during the visit.

A female patient is said to be noisy at night and to disturb the rest of the other patients. Her removal to an asylum is recommended.

The books and registers were examined and found to be regularly and correctly kept.

LUNATIC WARDS, PERTH POORHOUSE, *30th March* 1904.

Perth Poorhouse.

These wards were last visited on the 24th September 1903. Since then 4 men and 1 woman have been admitted, 1 man has been discharged, and 1 man has died. The cause of death is registered as pneumonia. There are 20 men and 20 women resident at this date.

There are no entries in the Register of Accidents, and there has been no escape. Two changes among the attendants have taken place.

The various dayrooms and dormitories were found as usual clean and in excellent order. A large amount of repainting has been done, and the rooms show a bright and cheerful appearance. For various reasons, chiefly on account of the erection in its present position of the new laundry, the quarters formerly occupied by the men and women, respectively, have been transposed.

An expedient for extinguishing fire, invented by Mr. Laird, the Governor, was seen in operation, and is so novel and apparently effective as to deserve notice. An iron pipe 1 to 1¼ inch in diameter is carried round the ceiling of the room and at intervals fitted with rose taps. The pipe, which is intended to contain water, is controlled from a tap outside the room. When turned on a drenching rain of water filled the apartment, and a coal fire placed in the centre of the room was extinguished in less than two minutes. It seems highly probable that this system, if properly applied to the interior of any building, would prove an efficient means of controlling an outbreak of fire and diminishing the volume of smoke. It is hoped that Mr. Laird will submit his ingenious invention to the criticism of experts and to the test of experiment.

The patients were found in good health, properly clad, and bearing every appearance of receiving a suitable dietary.

The books and registers were examined and found regularly and correctly kept.

LUNATIC WARDS, PERTH POORHOUSE, *29th July* 1904.

There are 40 patients, 20 men and 20 women, in the wards at this date. Since last visit 1 man has been admitted and 1 man has died. The death is

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registered as due to phthisis pulmonalis, and the cause was verified by *post mortem* examination.

No accident has occurred, and there has been no escape. The staff remains the same as at last visit.

The management of the establishment continues to be in every way satisfactory and creditable. The dayrooms have been thoroughly renovated and have a comfortable and bright appearance. The dormitories were in excellent order, being clean, cheerful in aspect, and furnished in a tasteful manner. The bedding was also in a satisfactory condition. The patients were free from complaints, they were clean in person, neatly clothed, and except 2 women, who were suffering from the infirmities of old age, their general health and condition were good. The occupation of the inmates in useful work continues to receive due attention—13 are engaged in cutting and bundling firewood in a large, well lighted, and well ventilated workshop. The new laundry is in use, and its equipment appears to be of an adequate and efficient character.

The novel fire-extinguishing arrangements, invented by Mr. Laird and fully described in the previous report, were seen in operation. They are without doubt most effective for their purpose, and if extended throughout the wards would reduce to a minimum the dangers and damages arising from an outbreak of fire. Ingenious methods have been provided for automatically setting these extinguishing arrangements in operation contemporaneously with the occurrence of a fire. This fire-extinguishing scheme is worthy of consideration, and it is recommended that the opinion of an expert be obtained.

The registers were examined and found regularly and neatly kept.

Wigtown Poorhouse.

LUNATIC WARDS, WIGTOWN POORHOUSE,
18*th February* 1904.

There are 33 patients, 18 men and 15 women, resident in the wards at this date.

Since last visit 1 man has been admitted, 1 man has been transferred to the asylum, and 2 men have died.

The deaths are registered as due in 1 case to pleuro-pneumonia and in 1 case to senile decay and ulcer of the intestine with limited peritonitis. The cause of each death was verified by a *post mortem* examination. The full records made of these examinations and the regular entries in the Medical Case Book as to the condition of each patient give ample testimony to the conscientiousness and ability of Dr. Anderson in the discharge of his duties.

There has been no accident during the period under review. At this date a male patient attempted to escape, but he was soon recaptured. An attendant has been dismissed, and one has been appointed in his stead.

A favourable report can be given of the general condition in which the patients were found. Their clothing was suitable and in good repair, and their personal tidiness was quite satisfactory. The evening meal was seen, of which appreciation was expressed by the more intelligent inmates. Three men and 1 woman were confined to bed, and the usefulness and convenience of the new male sickroom, which adjoins the dayroom, was abundantly apparent. It contained two men who require much attention. Industrial employment of the patients is well attended to—14 men and 11 women are regularly engaged in useful work.

The wards were in good order. Several of the rooms have been repapered and made cleaner and brighter in appearance. A ventilating tube has been provided for one of the female dormitories. Good fires were found burning in all the dormitories. The beds were clean and the coverings ample for the season. The establishment is carefully managed.

The registers were examined and found correctly kept and written up to date.

LUNATIC WARDS, WIGTOWN POORHOUSE,
9*th July* 1904.

There are 18 men and 15 women resident in the wards at this date. Since the 18th February of this year, the date of last visit, 2 men have been

admitted, 1 man was discharged, and 1 man has died. The cause of death, which was verified by *post mortem* examination, was a cancerous tumour in the neck which implicated internal organs. One man and 1 woman were confined to bed suffering from chronic ailments with debility. With these exceptions the general health of the inmates was good, and the majority of them were at the time of the visit usefully employed. Twelve men were working in the garden and 10 women were engaged in the various forms of household work. It was observed with approval that the patients enjoy a large amount of personal liberty. Four men are on parole beyond the grounds and do errands in the town and neighbourhood. All the patients are allowed to walk within the grounds at will, and none of the doors of the wards are locked during the day-time. The dayrooms and dormitories occupied by the patients were clean, bright, well aired, and generally in good order. The personal clothing of the inmates was satisfactory.

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The dietary has recently been varied and improved by the introduction of additional vegetables and fruit during the season.

The books and registers were examined and found correct.

INSTITUTIONS FOR IMBECILE CHILDREN.

Institutions for Imbeciles.

Baldovan Institution, 17*th March* 1904.

Baldovan Institution.

There are 122 children in the institution at this date. Of these, 2 boys and 1 girl are private pupils, 1 boy is supported by the institution, and 73 boys and 45 girls are paid for by various parishes throughout the country.

Since the 13th September 1903, when the institution was last visited, 6 boys and 6 girls have been admitted; 1 boy and 2 girls have been discharged; and 3 boys and 1 girl have died.

The causes of death are registered as meningitis, perforating gastric ulcer, phthisis, and intestinal obstruction. *Post mortem* examinations were made in all instances.

The children were disposed of as follows:—There were 62 pupils—49 boys and 13 girls—in the old house, 60 pupils—27 boys and 33 girls—in the new building. Several changes have been made in the old house which render it much more pleasant and comfortable. A new Sub-Matron has been placed in charge whose supervision of the clothing and cleanliness of the children is apparently conscientious and efficient.

The large hall, which is the principal living room, has been painted, and was found in good order. The services of a night nurse ensure the comfort of the children, and the proper sanitation of the dormitories during the night.

The children looked happy, and their general health was apparently good.

It is recorded with satisfaction that the Directors find themselves in the fortunate financial position of being able to proceed at once with the erection of two villas and a covered play-ground in connection with the new building. This will do away with the necessity of maintaining the old house as a part of the institution, and will in every way facilitate administration, supervision, and the comfort of the children.

The new building was found as usual in excellent order. There is a good staff of apparently capable nurses provided for the care of the many helpless and weakly children in this part of the institution, and so far as could be judged every detail necessary for the comfort of these sufferers is supplied.

It is understood that regular instruction is now given to the children in both houses each day, which includes ordinary elementary education, sewing, singing, etc. The sewing of some of the girls was seen, and it appeared to be good. A choir of girls sang several songs and hymns, and showed evident pleasure in the exercise.

An accident which might have had more serious consequences occurred since last visit. One of the bigger girls, while assisting a nurse in housework, removed a fire guard, in the temporary absence of the nurse, with the result that her pinafore caught fire and she was severely burned about the chest,

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neck, and face. She fortunately made a good recovery, and there are no marks on her face.

The institution is doing praiseworthy work in a very unostentatious manner, and the steady rise in the number of admissions and in the resident population shows that the public confidence in it is also increasing.

The books and registers were examined and found correct.

BALDOVAN INSTITUTION,
10*th August* 1904.

There are 132 children on the register of the institution at this date. Of these, 3 boys and 3 girls are private pupils, 1 boy is maintained by the charity of the institution, and 73 boys and 52 girls are chargeable to their parishes. One boy is absent on pass.

Since last visit on 17th March 1904, 8 boys and 10 girls have been admitted, 1 boy has been discharged, and 6 boys and 2 girls have died. These changes result in an increase of 3 in the number of private pupils, and of 7 in that of those maintained by Parish Councils. Since last report 4 private pupils have been admitted, and it is certain that if separate accommodation was provided for this class of children, their number would soon be considerable. Such a provision would add greatly to the financial prosperity of the institution.

The deaths are registered as due to tubercular affections in 5 cases, and to intestinal obstruction, epilepsy, and chronic hydrocephalus each in 1 case. In 5 instances the cause of death was verified by *post mortem* examination. The mortality from phthisis and other forms of tubercular disease is 62·7 per cent., a fact which points to the importance of the isolation of advanced cases of this disease, which is now recognised as of an infectious character.

Both in the old and new houses the appearance of the children afforded ample evidence of their being happy and contented, and on the best of terms with those in charge of them. The day being fine, all the children with the exception of the sick were out of doors, and their brown complexions indicated a health-giving amount of time spent at play in the grounds. Except in a few instances, the condition of the clothing and personal tidiness were commendable. Seven girls and 4 boys were confined to bed. The hospital wards are so excellently equipped and so tastefully furnished that their appearance left a most favourable impression. The nursing arrangements are also very satisfactory.

It is gratifying to be able to record that the institution has secured such a liberal addition to its funds as enables the Directors to proceed with the erection of two villas and a covered playground. The plans of these buildings have been carefully considered and sanctioned by the General Board. Already good progress has been made with the mason work of these extensions. These villas will not accommodate all the children in the old house, but it is hoped that the day is not far distant when the necessity for having two separate establishments will be obviated. The comforts of the children will be greatly increased, and the administration made more easy and successful when all the children are located in the new institution. Though the hall in the old house has been painted and otherwise renovated, yet the condition of some of the dormitories is unsatisfactory, and the walls of the passages are damp and insanitary.

Every section of the new house was found scrupulously clean and in excellent order. The dayrooms are comfortably and tastefully furnished and well supplied with pictures and other objects of interest. The means for indoor play and recreation are liberally provided. The stove in the large dayroom has been protected by a substantial and handsome guard. The dormitories were sweet and clean, and the condition of the bedding was highly satisfactory. The lavatories and sanitary arrangements are kept in the best of order. It is recommended that fire buckets be placed at convenient sites on both floors; they are easily handled, and if kept full, as they ought to be, they are of important service in the first moments of a fire.

According to the register there appears to have been only one change in the staff since last visit—one governess has resigned, and one has been appointed in her stead. The staff in the old house, which contains 57 children, consists of an assistant matron, a governess, 3 day nurses, and 1 night nurse. The ratio of day nurses to children in this house is 1 to 19, which is a very low

proportion, even when the help of the assistant matron and governess is taken into account. The staff in the new house comprises 2 charge nurses, and 6 assistant nurses for day duty, and 2 nurses for night duty. This house contains 75 children, and the ratio of day nurses to children is 1 to $9\frac{3}{8}$, which indicates a staff of adequate strength. It is recorded with satisfaction that the rate of board has been raised from £25 to £28. When the upkeep of the buildings, the amount of care and nursing required by these helpless children, and the cost of education are all considered, this rate will be found to be more than fully justified.

The register of admissions, discharges, and death were examined and found correct, and written up to date.

LARBERT INSTITUTION, *13th May* 1904. Larbert Institution.

There are at this date 285 pupils on the register of the institution. Of these, 35 boys and 16 girls are private pupils, 46 boys and 30 girls are elected pupils, and 103 boys and 55 girls are paid for by Parish Councils. All were seen in the course of the visit except 2 who were absent on holiday. Effect has been given in the above figures to the transference of 1 pupil from the elected to the pauper list.

Since 30th October 1903, the date of last visit, the following changes have taken place :—

	PRIVATE.		ELECTED.		PAUPER.		TOTALS.
	M.	F.	M.	F.	M	F.	
Admitted, . . .	1	1	–	–	7	4	13
Discharged, . .	1	1	1	–	14	4	21
Died, . . .	1	–	1	–	7	2	11

Though the population of the institution has decreased by 19, it is, however, necessary to point out that the number resident is still 35 in excess of the dormitory accommodation. The dormitories have again been carefully measured, and it is found, that according to present requirements as to floor space, the number which they can properly accommodate is 250. The wards in the new sanatorium will be adequate for 20 sick children. Consequently the number for which the Board are justified in licensing the institution is 270. As two-thirds or even more of imbeciles and idiots are of the scrofulous constitution, it will be clear that overcrowding is an evil which should be avoided : in other words, that the sleeping rooms of such children should be free of the unhealthy conditions engendered by excessive numbers.

The institution is prospering and its population has been steadily increasing, but its accommodation has not kept pace with its growth in numbers. In these circumstances either an extension must be provided or the number of children reduced to the present limit of the accommodation. It is earnestly hoped that the Directors will adopt the first alternative, as, judging from the increasing number of both private and pauper children admitted, there is evidently a public demand for further accommodation.

The mortality has been somewhat high since last October. The deaths are registered as due to tubercular disease in 7 cases, to epilepsy in 2 cases, to congestion of the lungs in 1 case, and to mediastinal abscess in 1 case. In 3 instances a *post mortem* examination was made. Four accidents have occurred —3 involved a fracture of a bone, and 1 was a bruise over the hip joint : all were due to falls caused by epileptic fits, and no blame was attached to those in charge.

Good progress is being made with the sanatorium, the plaster work being nearly completed. When ready for occupation this detached hospital will meet a long-felt want. At this date there were in the sick wards 11 children confined to bed, some of whom were the subjects of acute tubercular disease, who ought to have been isolated if the means for doing so were available. Provision of the best kind has been made in the sanatorium for separating those suffering from this infective disease and for treating them in the most successful methods known to medical science. It is understood with satisfaction that it is intended to place a trained hospital nurse in charge—an arrangement which will constitute a great advance in the care and treatment of those suffering from acute diseases.

A very favourable report can be given on the condition and management of the institution. The accommodation for private pupils is most tastefully and comfortably furnished, every room is bright and cheerful and made attractive by an abundance of objects of interest and decoration. Such surroundings cannot fail to have beneficial results both as to the training and happiness of the children, and to inspire the confidence of their parents. The other day-rooms and dormitories were scrupulously clean and in the best possible order. The condition of the whole institution is worthy of the highest commendation. It is recommended that spring mattresses be substituted for straw palliasses when the latter become worn out. This would effect a sanitary improvement of importance.

The dress and personal condition of the children reflected great credit on all concerned in their care. Great importance is rightly attached to the tasteful manner in which the children are clothed, as it forms a necessary part of their education and training. The dinner was seen; it was plentiful, of good quality, and well cooked, and its service is made an important lesson. The happy aspect of the children bore testimony to their kindly treatment. All capable of employment are judiciously induced to engage in useful work, and they are well taught and trained. The excellent character of the fancy needlework done by many of the children is most striking. The afternoon being wet, the great usefulness of the covered playground was made apparent: the children were sent there and engaged in many games in a healthy and unrestrained manner.

Great improvements have been effected in the grounds of the institution: a neat iron railing has been substituted for the unsightly fence of railway sleepers which obstructed the view to the east, and many of the paths and roads have been laid with red blaize, which is far easier for the children to walk on than the large gravel formerly in use, and its colour has so improved the appearance of the grounds as to suggest that the use of blaize might be extended to all the paths. A new road has been made to the west which forms a back entrance for goods, coals, &c. The laying-out of the grounds around the sanatorium is well advanced and has been ably done. The two new cottages are ready for occupation, and both externally and internally are well designed. The space between the cottages and the south parapet wall and railing is to be suitably fenced.

The pressure of water for extinguishing fire was tested and found only sufficient to raise the water to the windows of the first floor, but it is understood that by opening a valve near the gate lodge ample pressure is obtained. There is no alternative exit from the upper floors of the front block, a defect which should be seriously considered by the Directors.

The introduction of the electric light is a matter worthy of attention. This illuminant is safer, healthier, and cleaner than gas, and its many other advantages are now universally acknowledged.

The books and registers were examined and found accurately kept and written up to date.

LARBERT INSTITUTION,
26th and 27th October 1904.

On the 27th instant there were 273 pupils on the register of the institution. With the exception of 2 boys and 1 girl who were absent on holiday all were resident and were individually seen in the course of the visit.

Since the 13th May last, the date of the previous visit, the following changes in population have taken place :—

	PRIVATE AND ELECTED.		PAUPER.		TOTALS.
	BOYS.	GIRLS.	BOYS.	GIRLS.	
Admitted, . . .	16	6	3	3	28
Discharged, . .	10	11	5	2	28
Died, ...	6	1	3	2	12

The pupils on the register at this date are classified as follows :—

	BOYS.	GIRLS.	TOTALS.
Private, . .	33	16	49
Elected, . .	48	24	72
Pauper, . .	98	54	152
	179	94	273

A comparison of these numbers with those resident at the date of the last visit show that there is a decrease of 5 boys and 7 girls, or a decrease of 2 in the private, 4 in the elected, and 6 in the pauper pupils. This decrease had become necessary owing to the fact that the resident numbers exceeded the accommodation of the institution. It is desirable in the interests of children who are so particularly liable to tubercular affections that the air space for each child should be as liberal as circumstances will permit, and the Directors are abundantly justified in limiting the resident numbers to a certain standard. At the same time it is regrettable, in view of the large and steadily inceasing demand for admission, that the accommodation of the institution is so limited. The number of imbecile children in Scotland alone is certainly not under two thousand, and probably very much higher, while the accommodation in the two imbecile institutions of Larbert and Baldovan is only between three and four hundred. The Directors are under no obligation to extend the scope of their undertaking, and they possibly consider that their first duty is to maintain the interests of the special charitable work of the institution. But it may again be pointed out, with all deference, that the confidence of the public, as shown by the large number of private and of pauper patients in the institution, places within their grasp the means of establishing more securely this great charitable object.

The deaths are registered as due to phthisis and tubercular affections in 6 cases, and to influenza, intestinal catarrh, pleurisy, perityphlitis, empyema, and epilepsy in 1 case each.

There is only 1 entry in the Register of Accidents referring to a cut on the arm caused by accidentally breaking a pane of glass.

The pupils were usefully employed at work at the time of the visit in the following manner:—In household work 30 boys and 36 girls, at needlework 21 boys and 18 girls, at knitting 15 boys and 13 girls, in the garden 14 boys, in the laundry and kitchen 13 girls, and 7 boys were employed in various subsidiary duties. In all 170 pupils—87 boys and 83 girls—were usefully employed. This record would not be complete if it ended with a mere enumeration of those employed, for the character of the work done by many of the pupils was of a distinctly creditable kind. This was especially observable in the sewing, knitting, mat-making, etc., which was seen in the school-rooms. It would be difficult to speak too highly of the systematic and painstaking instruction which is daily given in the school. The results of education are no doubt unequal, but by careful attention to the aptitude of each pupil, and by classification accordingly, the general result is gratifying and surprising. The dictation and arithmetical exercises of some of the more advanced pupils were performed with precision and with comparatively few errors. The system of imparting general and useful knowledge, and the labour that is bestowed in the endeavour to overcome the slow mental grasp of new facts by the majority of the pupils are prominent features in the special method of tuition which is so successfully employed. The discipline in the school-rooms appeared to be kindly and firm, and the interest and attention of the pupils was well sustained.

On the second day of the visit the children were seen at dinner. The meal was served in an orderly and tasteful manner, and the food was excellent and well cooked. Grace was sung by the assembled pupils before and after meat. The behaviour of the children during the meal was admirable, and it was evident that they are carefully instructed in the minor conventionalities generally observed at table.

The dress of both sexes was, as usual, remarkable for neatness, variety in colour, and design, and for its good state of repair. The children presented generally a clean and healthy appearance. There is very little sickness, only one child being confined to bed. Two cases of measles have occurred recently; one of the children has recovered from the disease and the other is convalescent. The task of maintaining a state of such thorough cleanliness in person and in dress in a large population of helpless children must of necessity be an arduous one, demanding incessant supervision and constant attention. A reference to the daily registers reveals the truly wonderful success which results from the methodical system of management employed. For instance, the record for the 26th instant shows that on the preceding night there was only one child whose habits were faulty, and, although this, no doubt, is an

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exceptional record, the general average of such cases is remarkably low. The same active supervision is maintained throughout the day, with the very pleasing and beneficial results which have been referred to above.

The new hospital is ready for furnishing. It is in all respects a suitable building, and its elevation and outlook are pleasing and elegant. The interior promises to be comfortable and well adapted to the purpose for which it was constructed. If the furnishing is to be on the same liberal and substantial scale as the building—which there is every reason to believe it will be—the hospital should prove a valuable adjunct to the institution.

The grounds in front of the new hospital have been tastefully laid out by the employees of the institution assisted by some of the older male pupils, and an ornamental iron railing has been erected between these grounds and the public road.

The books and registers were examined and found correct.

LUNATIC DEPARTMENT OF H.M. GENERAL PRISON.

H.M. General Prison, Perth.

PERTH, *30th March* 1904.

To the Secretary of the General Board of Lunacy.

SIR,—I beg to report that I have this day visited the Lunatic Department of H.M. General Prison, Perth.

Since the 24th September 1903, the date of the last official visit by a member of the Board, 4 men have been admitted, 1 man was discharged recovered and placed in the Penal Department of the Prison, 1 man and 1 woman were discharged on warrant by the Secretary for Scotland, and 2 men were discharged and handed over to the care of the parochial authorities. The number resident at this date is 51, of whom 44 are men and 7 are women.

The inmates were found in good health and generally quiet and orderly in their demeanour. The classification of the inmates of the male division, to which reference has been made in the two previous reports, has resulted in a marked improvement in the conduct of the men. The minority who are noisy and turbulent are rigidly separated from the quieter and better behaved inmates. In this way not only are the majority protected from annoyance, but an inducement is offered to those men who can exercise self-restraint to show by their behaviour a claim to be admitted to the quieter section. It is found necessary to keep in seclusion two men who manifest impulsive and dangerous tendencies. There has been no accident to any of the inmates in the interval covered by this report.

The amount of attention that is given to the recreation and amusement of the inmates is deserving of notice. There is a good supply of books and magazines, and a daily paper is provided for the men. The game of bagatelle appears to be popular, but the board is rather small. It is suggested that a small-sized billiard-table would afford more scope and interest in this form of recreation. The erection of a special airing court for the more excited men has done away with the necessity for the old shelter, and its removal has done much to brighten the front of the building. The women were exceptionally quiet, and were all engaged at sewing or knitting.

The department was found clean throughout and in good order.

PERTH, *26th September* 1904.

To the Secretary of the General Board of Lunacy.

SIR,—I have to report that at this date I visited the Lunatic Department of the Perth General Prison. Since last visit, on 30th March 1904, 7 men have been admitted, 1 man has recovered and been transferred to the Penal Depart-

ment, 2 women have been conditionally liberated, and 4 men and 1 woman have been sent to District Asylums as pauper lunatics. There have been no deaths. The number resident at this date is 50, in the proportion of 46 men to 4 women. During the period under review there has been an increase of 2 in the number of men and a decrease of 3 in that of the women. There is vacant accommodation for 3 men and 8 women.

Full opportunity was given to the inmates of expressing their wishes and of directing attention to any complaints. Apart from some appeals for discharge, one of which has been specially reported on to the Prison Commissioners, there were no grievances calling for investigation. Three men were in seclusion on account of violent and aggressive tendencies, and 12 men of the more dangerous class are accommodated in the south wards. It is recorded with regret that one of these inmates recently made a violent assault on Dr. Macnaughtan, from which he is at present slowly recovering. A warder was assaulted by an inmate, but fortunately escaped with a few slight injuries. It is creditable to the management of the Department that no mechanical restraint is resorted to. The amount of seclusion is considerable, but it cannot be said to be excessive when the turbulent and dangerous character of 3 of the men is taken into account.

The majority of the inmates were quiet and orderly in behaviour and many expressed contentment with their treatment. The clothing was clean, sufficient, and neat in appearance. The dinner at this date consisted of pea soup, stewed beef, potatoes, and bread; it was a substantial meal which was evidently appreciated. There are five tables which admit of a proper and desirable classification of the inmates at meal-times. The general health is very good, no one being confined to bed. As regards employment, 63 per cent. of the men and 75 per cent. of the women are engaged in useful occupation; 15 of the men work in the garden. One of the inmates is a general paralytic, 3 are epileptic, but the fits have in each case been in abeyance for some time, and there is no one who is regarded as actively suicidal. Divine service is held on Sunday for the Presbyterians and Roman Catholics, and a service for Episcopalians on Monday. Books, magazines, illustrated papers, and indoor games are amply supplied. The bowling-green in the men's exercise court is understood to be well patronised.

The wards were in good order, clean, and well ventilated. There are two staircases from the upper floor in the male department which afford alternative exits in the case of fire. The ground in the exercise court in connection with the south ward has been laid with concrete. This improvement does away with the gravel, which could be used as a means of assault by the violent inmates of this section.

Everything seen during the visit indicated great care and ability in the management.

APPENDIX C.

Appendix C.

Reports on Patients in Private Dwellings.

GENERAL REPORTS ON THE CONDITION OF PATIENTS IN PRIVATE DWELLINGS.

Report by Dr. John Macpherson.

REPORT BY DR. JOHN MACPHERSON.

I beg to report that in the month of September I visited the patients living in private dwellings within the county of Ross. Owing to want of time I found it necessary to omit visitation of the three parishes of Fearn, Tarbat, and Kincardine, in which parishes there are 12 patients. I visited in all 118 patients, 57 men and 61 women. Of that number, the larger proportion, 71 persons, 34 men and 37 women, were living with relatives, while 45 persons, 22 men and 23 women, were boarded with strangers. One man and 1 woman lived alone. With the exception of 7 curatory or private patients, all the patients boarded out in this county are paupers. On the whole, the standard of comfort and the mode of life led by these patients is the same as that of their guardians, and in no instance was it suspected that the patient was at a disadvantage in the participation of a full share of the family life. With two exceptions, the recommendations which I found it necessary to make had reference to administrative matters, such as clothing and allowances. The more serious recommendations affected the conduct of 2 patients, a man and a woman, who were each passing through attacks of mania and were causing annoyance to the relatives with whom they lived. Happily these attacks proved of short duration, and it is now understood that both patients have ceased to be a source of anxiety to their guardians.

REPORT BY DR. J. F. SUTHERLAND.

Appendix C.

Reports on Patients in Private Dwellings.

Report by Dr. J. F. Sutherland.

I beg to submit the following report, relative to the private, curatory, and pauper patients visited by me in 1904 in the 17 counties enumerated below.

TABLE I.

1904. Counties Visited.	Parishes Visited.	A.—Private and Curatory Patients.			B.—Insane Poor.						Total of B.	Total of A and B.	Number of Visits Made.
					Single Patients.			In Specially Licensed Houses.					
		M.	F.	T.	M.	F.	T.	M.	F.	T.			
Aberdeen	49	9	6	15	38	53	91	8	16	24	115	130	131
Ayr	26	6	6	12	31	24	55	16	82	98	153	165	220
Bute & Arran	4	8	–	8	19	16	35	4	4	8	43	51	51
Caithness	9	–	–	–	32	32	64	2	7	9	73	73	73
Dumfries	19	4	5	9	10	11	21	4	3	7	28	37	37
Elgin	10	4	5	9	13	13	26	2	4	6	32	41	41
Edinburgh	16	16	58	74	24	47	71	2	10	12	83	157	158
Fife	43	5	13	18	43	45	88	119	263	382	470	488	893
Inverness	20	3	5	8	61	84	145	10	24	34	179	187	251
Kincardine	9	2	3	5	3	6	9	–	5	5	14	19	19
Kinross	3	1	–	1	2	2	4	13	27	40	44	45	69
Kirkcudbright	11	1	4	5	3	13	16	–	–	–	16	21	21
Nairn	3	1	–	1	6	4	10	–	–	–	10	11	11
Orkney	16	–	3	3	22	22	44	–	2	2	46	49	49
Perth	47	13	18	31	45	37	82	73	110	183	265	296	390
Shetland	11	2	–	2	19	19	38	–	–	–	8	40	40
Wigtown	8	–	–	–	8	11	19	–	–	–	19	19	19
Totals	304	75	126	201	379	439	818	253	557	810	1628	1829	2473

GENERAL OBSERVATIONS.

During the past year, 1829 patients (201 private and curatory and 1628 pauper) were visited and reported upon, and to these 2473 visits were paid, the largest number made in any previous year, 644 patients being visited twice.

Appendix C.

Reports on Patients in Private Dwellings.

Report by Dr. J. F. Sutherland.

At the close of the Fourth International Home Relief Congress, held in Edinburgh in June, Dr. Peeters, Medical Superintendent of the well-known colony of the insane at Gheel; Dr. Deperon, Medical Superintendent of a similar colony at Lierneux; Dr. Van Deventer of Haarlem; and Miss Imlach, one of the Managers of the Edinburgh Royal Infirmary, visited the small Fife colonies of Star (30), Pitlessie (15), Thornton (19), accompanied by Dr Turnbull, Medical Superintendent of the Fife and Kinross District Asylum, and your reporter, and expressed their entire satisfaction with all that came under their notice.

The analysis made in Table II. as to the use of family care in 175 parishes with nearly 2000 paupers patients in the four counties of Aberdeen, Fife, Elgin, and Kincardine, brings into clear relief two significant and striking facts, *first*, the large annual saving to these counties if the mean of 20 per cent. for Scotland in private dwellings were to apply to them, and the still larger saving if 30 per cent.—quite a possible and attainable figure—was reached; and *second*, the effect of the utilisation of this method of providing for suitable cases, to its full extent or the reverse, as it reacts on the poor and lunacy rates levied in parishes, burghs, and counties.

With regard to the first, it can be demonstrated that if the 85 parishes with 401 insane, not one of whom is to be found in private dwellings or licensed houses, and the 27 parishes with 978 insane, of whom only 95, or 9 per cent., are thus provided for, attained Scotland's mean, an annual saving of £2915 would result. Similarly if 30 per cent.—admittedly a possible figure under the well-directed efforts of all concerned—were attained, the annual saving would amount to something like £5000 to the four counties, either sum being more than ample to provide both for the appointment of one or two officials to be specially set apart for this work.

With regard to the second point, viz., the effect of a freer use of the private dwelling on the poor rate and lunacy rate, it is no less apparent, and there is no mistaking its significance, although the exact financial benefit is somewhat obscured by the varying ratios of insane chargeable to different parishes tending to varying expenditures, by the varying cost for the relief of ordinary poor, and by the differing rateable capacity of parishes as influenced by prosperity associated with mines, factories, workshops, harbours, shootings, etc., or by the reverse in parishes in which rateable subjects are purely agricultural or of small taxable value. Not putting out of sight these considerations, it comes to this, that in 56 parishes with 591 chargeable insane, of whom 165, or 30 per cent., are placed in private dwellings, the average poor assessment is 8½d. per £, whereas in other 60 parishes with 1244 insane, of whom only 93, or 7·5 per cent., are thus provided for, the average assessment is 1s. per £.

The lesson of the two sets of figures submitted is obvious. The high poor rate in parishes, and the low ratio of insane under family care is not a mere coincidence. In large measure, and, as a rule, except when exceptional conditions prevail, it may be accepted that the one is the corollary of the other. To Parish Councils it conveys one plain meaning, and that is that a proper and freer use of the long and well-tried method of the private dwelling for the chronic and harmless insane will go a long way to reduce the poor rate, and likewise the lunacy rate levied for unnecessary extensions of asylums. Reduced rates resulting from the greatly reduced cost of maintenance of the insane indicated, and from a restriction of the extension of institutional buildings to what is absolutely necessary, are matters to be sought after and welcomed by communities the taxable capacity of which has its limitation, as well as by communities which consider that that limit has already been reached.

The excuse put forward by many inspectors of poor, some of whom do, and others do not, devote their whole time to their work, is that they are unable to find in their own immediate localities suitable homes and guardians. It has to be admitted that, in a measure, this may be the case. But on the other hand, writing from intimate knowledge of the entire country, it may be safely asserted that such inspectors do not require to go far afield to overcome this difficulty, as good homes can be found provided adequate remuneration is offered for the trouble, sacrifice, and drawbacks involved in the family care and supervision of the insane.

The following are the principal defects observed and recorded in regard to the care and supervision of the 1829 patients. In four cases the care was bad,

in seven indifferent, in thirteen moderate, in five unsatisfactory and defective in supervision, in ten the accommodation was poor and calling for change, in twelve the bedding and clothing was inadequate, and in three cases there were good grounds for believing that the dietary was insufficient—in all 54, or 3 per cent. of the number of patients visited. For some years past the proportion of the defects referred to has been about the same. Medical visitation was defective in twelve instances, visits by Inspectors of Poor in sixteen.

Appendix C.
Reports on Patients in Private Dwellings.
Report by Dr. J. F. Sutherland.

TABLE II.

Showing the Number and Percentage of Lunatic Poor in Private Dwellings in Grouped Parishes in the Five subjoined Counties.

County.	Grouped Parishes.	Population in 1901.	Total Insane.	Number in Private Dwellings.	Percentage in Private Dwellings.
ABERDEENSHIRE - -	Seventeen Parishes -	22,381	109	40	*36*
	Nine ,, -	18,354	77	15	*20*
	Fourteen ,, -	60,379	277	25	*9*
	One (Aberdeen city) -	153,503	425	36	*8·5*
	Thirty-eight Parishes -	55,821	161	...	...
	Seventy-nine Parishes	310,438	1,049	116	*11*
ELGIN - - - -	Nine Parishes - -	20,795	97	35	*36*
	Three ,, - -	10,190	30	7	*11*
	Six ,, - -	13,450	46	...	...
	Eighteen Parishes -	44,435	203	42	*21*
KINCARDINE - -	Four Parishes - -	6,514	26	6	*30*
	Fifteen ,, - -	25,023	65	...	...
	Nineteen Parishes -	31,537	85	6	*7*
KINROSS - - -	Two Parishes - -	3,480	14	4	*28*
	Three ,, - -	3,500	13	...	...
	Five Parishes - -	6,980	27	4	*15*
FIFE -	Twelve Parishes - -	63,998	196	55	*27*
	Nine ,, -	26,806	96	19	*20*
	Nine ,, -	83,489	216	27	*12*
	Twenty-three Parishes	40,816	116	...	...
	Fifty-three Parishes -	215,109	624	101	*16*

ELGIN.

This county with 21 per cent. of its pauper patients provided for in private dwellings approximates to the mean for Scotland, but as was the case in other counties analysed in this fashion in former reports some parishes greatly exceed this mean (20), while others fall as much below it. In the first group are nine parishes, including the important ones of Elgin, Rothes, Bellie (Fochabers), with a percentage in private dwellings of 36; in the second three parishes, including Forres, Cromdale (Grantown-on-Spey), etc., with a percentage of 11; and in the third six parishes, inclusive of Drainie, (Lossiemouth and Branderburgh), Duffus (Burghead), Kinloss (Findhorn), with 46 chargeable insane, not one of whom is maintained outside the county asylum. It is apparent that what is possible for the nine parishes in the first group, or something approaching it, is possible for the three in the second group, and the six in the third.

Appendix C.

Reports on Patients in Private Dwellings.

Report by Dr. J. F. Sutherland.

Manifestly in this county there is room for action being taken by the Inspectors of Poor of the nine parishes, with 106 chargeable insane, or more than half of the whole, which would lead to the discharge from the county asylum of something like 22 patients, and to the consequent saving of £330 per annum. It may be that the explanation of the indifferent attitude of so many parishes is due to the low asylum rate of board being 8s. 5½d. per week, which approximates the private dwelling one of 6s. 3¼d., but to the former, in fairness when setting up comparisons, falls to be added interest on buildings, etc., which would add, at the lowest computation, 3s. 6d. per week to the asylum cost, thus raising it to something like 12s. per week.

The effect of this policy on the part of parish councils and their Inspectors—which, judging from interviews your reporter had with interested officials, it is believed will undergo a change during the coming year—is seen in the poor rate. Thus, taking the 13 parishes with five insane and over, it would appear that in six of these, including Elgin, Rothes, Bellie, Dallas, with more than 20 per cent. provided for in private homes, the average poor rate is 1s. 1½d. per £, while in seven, including Cromdale, Drainie, Duffus, Forres, with 5·5 per cent. boarded out, the rate is 1s. 5½d. per £. That there should be this remarkable difference in the poor rate is not surprising, and is significant, seeing one of the largest items of expenditure by parish councils is for lunacy maintenance.

Aberdeenshire.

In the 83 parishes of this county with 1049 (in Royal Asylums, 715, in Poorhouse Lunatic Wards 289) pauper insane, only 116, or 11 per cent., are to be found in private dwellings, the ratio being one of the lowest in Scotland, and little more than one-half of its mean, and not one-third of Highland and Insular counties. This low ratio is brought about by the fact that 38 parishes, including Methlick, Kintore, Turriff, Rathen, St. Fergus, with 161 chargeable insane, have none placed under family care; that fourteen more, including the large ones of Peterhead, Fraserburgh, Huntly, Ellon, Fyvie, Tyrie, and Longside, with 277 insane, have only 25, or 9 per cent.; and that one, Aberdeen City Parish, with 425 insane, has only 36, or 8·5 per cent. On the other hand, 17 parishes (Old Deer, Echt, Foveran (Newburgh), Pitsligo (Rosehearty), Lonmay, Leochil-Cushnie, etc.) with a total of 109 chargeable insane, have 40, or 36 per cent., placed under family care.

It is beyond doubt that the 66 parishes, including the Aberdeen City Parish, doing next to nothing might greatly improve their position, even if they did not touch 36 per cent.

During an interview with Mr. Williams, Inspector of Aberdeen City Parish, as to the position of his parish in the matter of boarding out (one so different from Edinburgh, Glasgow, Govan, and Dundee), it came to my knowledge that this energetic and capable official contemplates during the coming year taking active steps to extend this method of providing for a large section of his insane.

That many of the rural parishes do so little may, in some measure, be due to the low rate of board per week—7s.—in the licensed wards of the Poorhouse at Maud. The weekly cost of private-dwelling patients is 6s. 1½d., of asylum patients 12s. 3d., or double that of the former. Based on these figures, if the Aberdeen City Parish, with its 8·5 per cent., reached the mean of Scotland boarded out, viz., 20 per cent., 49 more would be boarded out, and there would be saved annually £880, or, if 30 per cent. were boarded out, £1638. Similarly fourteen parishes with only 9 per cent. provided for in this way, would save annually on the 20 per cent. ratio £540; and on the 30 per cent. ratio, £1044; and likewise the 38 parishes with none of their insane outside the asylum would, on the 20 per cent. calculation, save annually £576, and on the 30 per cent., £864. These economies are not only real and possible, but are surely worth striving after.

The average poor rate for all the 83 parishes in Aberdeen, and for Aberdeen City Parish, is 10½d. per £; for the 17 parishes with 36 per cent., and for the 14 with 20 per cent. boarded out, it is 10d.; for the 14 parishes (Huntly, Fraserburgh, Peterhead, Ellon, New Deer, etc.) with 9 per cent., it is 1s. 1½d.; and for the 14 of the 39 parishes (Turriff, Kintore, Inverurie, Methlic, Rathen,

Kemnay, etc.) with five chargeable insane and upwards doing nothing, it is 10¾d. The difference between the four groups of parishes in the rate, affected no doubt by other matters, such as the varying lunacy ratios prevailing in different parishes, the relative presence of poverty, and the taxable capacity of different parishes is trifling, and not so convincing as the larger differences of rate shown in other counties. But while that is so, it is matter for reflection not that the rate is as high in one group as in another but what the rate would be if the 17 parishes with 36 per cent. boarded out did nothing in the way of boarding out, because in most parishes where the percentage is under 10 it simply refers to patients who in any case would reside with their relatives.

The saving which would accrue to the parishes of Aberdeen other than the City would more than justify the appointment of an official whose sole duty it would be to extend the system.

Kincardine.

In the 19 parishes comprising this county only 7 per cent. of the insane are provided for in private dwellings—the lowest percentage in Scotland, and about one-third of its mean. Four parishes with 20 chargeable insane have 6, or 30 per cent., thus provided for, while the other 15, including Fetteresso (Stonehaven), Bervie, Laurencekirk, Dunnottar, Banchory Devenick, and Banchory-Ternan, with 65 insane have none outside the institution.

The average poor assessment for the county is 6d. per £; for the four parishes of Marykirk, St. Cyrus, Banchory-Ternan, and Strachan, with 30 per cent. boarded out, it is 3¾d.; and for the five largest of the 15 parishes with none. out, it is 9¼d.—Fetteresso being 4d., Dunnottar, 1s. 2d., and Laurencekirk, 1s. 1d.

The poor rate is thus much higher in the parishes not boarding out; and this is not surprising, seeing the cost of 57 patients in the Royal Asylum is 12s. 3d. per week, or double that of the private-dwelling cost, viz., 6s. 5d. In the licensed wards of Kincardine Poorhouse the cost of fourteen patients is 6s. 2d., or 3d. less per week than the private dwelling. That so little is done by the Inspectors of Poor to utilise the private dwelling for those fitted for it, is possibly due to the low rate of maintenance in the Poorhouse wards.

But the fact remains that if the 15 parishes doing nothing boarded out 20 per cent. of their insane, the mean for Scotland, the annual saving would be £185; if 30 per cent., already reached by four parishes in the county, were attained, the saving would amount to £300.

Kinross.

This county with its five parishes has 27 pauper insane, of whom 4, or 15 per cent., are to be found in private dwellings. This percentage is considerably below the mean for Scotland. Two of the parishes with 14 patients have 4, or 28 per cent., in private dwellings; while three, including Orwell (Milnathort), with 13 insane, have none outside the District Asylum.

The weekly maintenance rate in private dwellings is 7s. 3d., in the county asylum 9s. 7½d., to which falls to be added interest on buildings which, per bed, may be fairly put at 3s. 6d. more per week, or 13s. 1d. in all—a sum almost double that of the cost of the private dwelling.

The average poor assessment for all the Kinross parishes is 3½d. per £. Being a small one it is not felt, and the need for economical effort is not appreciated.

Fife.

Fife, with its 60 parishes maintaining 624 insane, provides for 101 of these, or 16 per cent., in private dwellings. This figure places Fife considerably below the mean of Scotland. As in other counties, there are differences here in the utilisation of family care for the chronic and harmless insane by different parishes. Thus in twelve parishes, including Kirkcaldy, St. Andrews, Forgan (Newport-on- Tay), Largo, etc., the percentage is 27; in nine more, including Tayport, Leslie, Leuchars, Auchterderran, etc., it is 20 per cent.; in nine others, including Dunfermline, Wemyss (Methil), Beath, Cupar,

Appendix C.

Reports on Patients in Private Dwellings.

Report by Dr. J. F. Sutherland.

Inverkeithing, etc., 12 per cent., while in 23 parishes, including Scoonie, (Leven), Markinch, Culross, Kinghorn, Newburgh, etc., with 116 chargeable insane, not one is to be found outside the District Asylum.

There is no reason why these 23 parishes should be in this position—a position which disregards the increased cost of maintenance, and the need for asylum extension at considerable cost. Only a little less unfavourable is the position of the nine parishes, inclusive of some of the most important and largest, in Fife.

The cost per patient per week in the District Asylum is 9s. 7½d., to which falls to be added 3s. 6d. per week as interest on buildings; in the private dwelling it is 7s. 3d. per week.

Calculating on this basis, the saving to the nine parishes with 20 per cent. boarded out, did this figure read 30 per cent., would amount to £150; the saving to the nine parishes with 12 per cent. boarded out on the 20 per cent. ratio, would be £270, and on the 30 per cent., £600; while the saving to the 23 parishes with none out would be £345 and £510 respectively. For the combined parishes the totals would be £1110 and £1765.

The average poor assessment for this county is a comparatively low one, being 7d. per £. In the 12 parishes with 27 per cent. under family care the average rate is 6¼d.; in the nine with 20 per cent. it is 7¼d.; in the nine with 12 per cent. it is 7d¼.; while in the ten largest of the 23 parishes with none out (Scoonie, Newburgh, Tulliallan, Markinch, etc.), it reaches 10d.

This progressive increase of rate with a progressive decrease of the percentage of patients to be found in private dwellings, is both instructive and significant. There is nothing to indicate that it is accidental, rather there is much to indicate a real connection between the increase of the one and the decrease of the other.

Table III.

Changes during 1904 among pauper patients in Private Dwellings in the 17 Counties enumerated.

Counties.	(*a*)				Total.	(*b*) Admissions.		Total.	Balance + or −
	Died.	Recovered.	Removed to Asylums.	Removed from Roll.		Discharged from Asylums Unrecovered.	Intimated by Inspectors of Poor.		
Aberdeen	6	3	1	1	11	9	7	16	+ 5
Ayr	5	1	4	0	10	13	6	19	+ 9
Bute and Arran	–	–	–	–	–	–	1	1	+ 1
Caithness	5	1	2	1	9	8	5	13	+ 4
Dumfries	2	–	3	–	5	3	3	6	+ 1
Edinburgh	4		1	3	8	4	6	10	+ 2
Elgin	–	1	1	–	2	–	4	–	+ 2
Fife	16	2	18	1	37	26	3	29	− 8
Inverness	9	–	2	1	12	11	11	22	+10
Kincardine	1	–	–	–	1	1	–	1	–
Kinross	2	2	7	1	12	9	–	9	− 3
Kirkcudbright	–	–	2	–	2	–	–	–	− 2
Nairn	–	–	–	–	–	–	1	1	+ 1
Orkney	2	–	–	1	3	–	1	1	− 2
Perth	12	4	17	4	37	28	3	31	− 6
Shetland	2	–	1	–	3	–	2	2	− 1
Wigtown	2	1	–	–	3	–	1	1	− 2
	68	15	59	13	155	112	54	166	+ 11

Setting the losses by deaths, by removals to asylums, by recoveries, and by removals from the roll by minute of Parish Councils against fresh admissions, there is a balance in favour of the latter of 11.

Admissions.

Of these there were 166 (last year for same area 173), of whom 112 were discharged from asylums unrecovered, and 54, or 33 per cent., intimated by inspectors of poor. The ratio by the two channels of admission to the register of insane in private dwellings is thus 100 to 48, quite a contrast to that prevailing thirty years ago, when the proportions were more like 100 to 100.

Appendix C. — Reports on Patients in Private Dwellings.

Of the 166, 142 were visited by your reporter—60 being males and 82 females. The majority were placed under family care in Ayr, Aberdeen, Inverness, Fife, and Perth.

Report by Dr. J. F. Sutherland.

Of the 142, 39, or 27 per cent., were placed with related, and 103, or 73 per cent., with unrelated guardians. This is a complete reversal of what was experienced thirty years ago.

The mental infirmities from which the 142 suffered were as follows :—

Imbecility (congenital or acquired in early life),	46
Dementia,	46
Senile Dementia,	6
Delusional Insanity,	20
Degeneracy,	6
Mania,	3
Melancholia,	3
Ill-defined,	12
	142

Imbecility and dementia each account for 32 per cent. ; senile dementia and degeneracy, each for 4·2; and delusional insanity for 14 per cent. All disorders other than those of the congenital and infantile types of imbecility account for 70 per cent. of all the cases of admission seen.

The ages of the 142 admissions are tabulated *infra.*

Under 15	15-20	21-30	31-40	41-50	51-60	61-70	71-80	Above 80	Total.
6	12	25	25	32	18	21	3	—	142

Of the 18 under 21 years 16 were males. Of the aggregate at all other age periods females are nearly double the males, and at the period between 41 and 50 years, nearly four times. The number of senile dements above 70 is smaller than usual.

Recoveries.

Of recoveries, intimated as such, there were 15. Two were under 1 year in residence, seven under 2 years, four between 2 and 9 years, one 14 years, and one 20 years. They were of all ages from 17 to 74.

Removals from Roll.

These amounted to thirteen, 3 males and 10 females. This step was taken in one case because of pregnancy, the relative with whom she resided refusing to part with her to the parish authorities. Five were taken over by relatives, one ran away, and one succeeded to money. In four instances no reason was assigned for the step.

Removal to Asylums.

Removal to an asylum was resorted to in 59 cases, 25 being males and 34 females. The percentage to the number resident is something like 3·1—a figure suggestive of little disturbance throughout the year in the composition

Appendix C.

Reports on Patients in Private Dwellings.

Report by Dr. J. F. Sutherland.

and life of a community of 1900. Forty-nine were living with unrelated, and ten with related guardians.

The periods of residence ranged from 11 days up to 27 years. Ten were under 6 months in residence, eight between 6 and 12 months, twenty-three between 1 and 5 years, fifteen between 6 and 20 years, and three over 20 years.

The principal reasons assigned for removal are as follows:—bodily disease and faulty habits, 14; prone to wander aimlessly or deliberately, 8; quarrelsome, noisy, unmanageable, and minatory, etc., 11; discontented, 3; indecent and offensive, 3; sexual accident, 3; intoxication, 1; incapacity or death of guardian, 3; and bad care, 3.

Deaths.

The causes of the 68 deaths, as certified by the medical attendants, were as undermentioned—a total similar to that of last year for the same area:—

1. Cerebral and Spinal Affections:—		
(*a*) Apoplexy, &c.,	8	
(*b*) Epilepsy,	3	
(*c*) Convulsions,	2	
(*d*) Spastic Paralysis,	1	
(*e*) Abscess of Brain,	1	
(*f*) General Paralysis,	1	
	—	16
2. Thoracic Affections:—		
(*a*) Heart Disease,	11	
(*b*) Pneumonia,	3	
(*c*) Bronchitis,	2	
(*d*) Phthisis,	5	
	—	21
3. Abdominal Affections:—		
(*a*) Tubercular Enteritis,	1	
(*b*) Enteritis,	3	
(*c*) Gastric Ulcer,	1	
(*d*) Intestinal Obstruction,	1	
(*e*) Nephritis,	2	
(*f*) Cystitis,	1	
	—	10
4. Other Diseases:—		
(*a*) Tumour of Superior Maxilla,	1	
(*b*) Gangrene,	1	
(*c*) Chronic Rheumatism,	1	
(*d*) Influenza,	1	
(*e*) Senile Decay,	11	
(*f*) Asthenia,	1	
(*g*) Syncope,	1	
(*h*) Other Causes,	4	
	—	21
Total		68

The percentage of deaths to number resident approximates 3·6.
The number of deaths at certain age periods is as follows:—

Under 20	20-30	31-40	41-50	51-60	61-70	71-80	Above 80	Total.
-	4	7	11	9	14	21	2	68

The mean age of the 68 was 60 years. The ages of 23, or 34 per cent., exceeded seventy years.

Of the 68 patients who died, four had been resident under 1 year, nine above 1 and under 2 years, twelve above 2 and under 5 years, twelve above 5 and under 10, twenty-two above 10 and under 20, and nine above 20 years, three of the nine over 20 having been resident respectively 30, 33, and 34 years.

The average period of residence in private dwellings of the 68 was 11 years.

Accidents.

In a community of 1900 these were few, three being sexual, and three due to fractures. There were no serious burning casualties, although the number of epileptics is so large. Two of the sexual accidents occurred to patients residing with near relations, and one with a stranger who, owing to advancing years, had lost the activity needed for supervising a young woman.

Private and Curatory Cases.

Of such 201 were visited, 75 being males and 126 females. Twenty-two deaths were reported, which indicates a high mortality rate; but it has to be remembered that the majority are put under curatory in advanced age owing to senile dementia, aphasia, etc.

The changes among this class were numerous, amounting to 35 (9 private and 28 curatory). In addition to the 22 who died, 5 were sent to asylums, 6 recovered, and 2 had the curatories discharged. Of the five sent to the asylum two were removed because of unmanageable conduct. In two cases, both males, the guardianship was unsatisfactory, and removal to other homes had to be resorted to.

Quite a number of the curatory cases are not certified, and do not appear on the Board's register, though some of them, residing with strangers, and kept for profit, might be formally certified and registered as of unsound mind, if special circumstances did not point to that step being unnecessary and undesirable.

Appendix C.

Reports on Patients in Private Dwellings.

Report by Dr. Charles Macpherson.

REPORT BY DR. CHARLES MACPHERSON.

I have to report that during 1904 I visited 1142 patients residing in private dwellings. Of these, 110 were private patients and 1032 were paupers. Seventeen counties were visited, and the patients were scattered over 199 parishes. A number of them were visited twice in the course of the year, and altogether 1449 visits were paid. No patients on the register in my district were left unvisited.

The following Table shows the distribution, classification, and number of patients visited and reported on :—

TABLE I.

Counties Visited.	Parishes Visited.	Private and Curatory Patients.			Pauper Patients.						Number of Patients Visited.	Number of Visits Paid.
					Single Patients.			In Specially Licensed Houses.				
		M.	F.	T.	M.	F.	T.	M.	F.	T.		
Argyll, - -	27	5	10	15	56	42	98	26	18	44	157	184
Banff, - -	16	1	2	3	29	32	61	–	2	2	66	66
Berwick, - -	9	1	1	2	9	9	18	2	2	4	24	24
Clackmannan, -	4	1	2	3	2	3	5	–	1	1	9	9
Dumbarton, -	8	4	5	9	2	9	11	3	2	5	25	25
Forfar, - -	23	1	8	9	29	33	62	6	34	40	111	111
Haddington, -	11	3	3	6	5	5	10	–	3	3	19	19
Lanark, - -	23	14	11	25	38	70	108	35	74	109	242	352
Linlithgow, -	4	–	–	–	4	4	8	–	–	–	8	8
Peebles, - -	3	1	–	1	–	3	3	–	–	–	4	4
Renfrew, - -	12	7	5	12	4	11	15	–	–	–	27	27
Ross (part of) -	3	–	–	–	7	5	12	–	–	–	12	12
Roxburgh, -	12	3	6	9	13	16	29	–	–	–	38	38
Selkirk, - -	2	–	–	–	2	1	3	–	–	–	3	3
Stirling, - -	18	5	10	15	22	25	47	62	95	157	219	389
Sutherland, -	11	1	–	1	8	23	31	–	–	–	32	32
Western Isles,-	13	–	–	–	77	69	146	–	–	–	146	146
Totals, -	199	47	63	110	307	360	667	134	231	365	1142	1449

PRIVATE AND CURATORY PATIENTS.

There is nothing calling for special comment regarding these patients. They were all found to be well cared for, and provided for in all respects as well as their circumstances would permit. These cases cause much more trouble to the Visiting Commissioner than the pauper patients do. Although Curators are always requested to notify the Board of any changes, in a very large number of cases they neglect to do so, and consequently every year—often after travelling considerable distances to visit a patient—we are told either that he is dead or has been removed to another part of the country This involves a considerable amount of extra travelling and expense, but as, apparently, the Curator is not legally bound to keep the Board informed of the changes, I fear there is no practicable remedy for this inconvenience.

Pauper Patients.

The following Tables show the changes which have taken place in my district during the year :—

Table II.

Admitted during 1904 :—

By Intimation.	By Removal from District Asylum.	After Liberation on Probation.	Total.
62	78	11	151

Table III.

Removals during 1904 :—

Died.	Recovered.	Removed from Roll.	Sent to Asylum.	Total.
40	13	9	42	104

These figures show much greater activity in the boarding out of patients during the past year than I have ever been able to report before, and shows net addition to the number in the district at the end of 1904 of 47 patients.

Deaths.

The mortality has again been very low, being only 3·5 per cent. of the number visited during the year. There have been no deaths from any zymotic disease. The causes of death as certified by the medical attendants may be grouped as follows :—

Cerebral Affections :—		
(*a*) Apoplexy and Paralysis,	9	
(*b*) Epilepsy,	2	
(*c*) General Paralysis,	1	
(*d*) Tubercular Meningitis,	2	
(*e*) Hydrocephalus (Chronic) and Convulsions,	1	
	—	15
Thoracic Affections :—		
(*a*) Diseases of Heart,	11	
(*b*) Pneumonia, Bronchitis, &c.,	4	
(*c*) Phthisis,	3	
	—	18
Diabetes,		1
Tubercular Orchitis,		1
Old Age and General Debility,		2
Fracture of Neck of Femur and Exhaustion,		1
Killed on Railway (accidental),		1
Burning,		1
Total,		40

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Reports on Patients in Private Dwellings.

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The age at death varies from 88 to 10 years.

3	were	between	-	-	80	and	90	3	were	between	-	-	40	and	50
6	,,	,,	-	-	70	,,	80	1	,,	,,	-	-	30	,,	40
14	,,	,,	-	-	60	,,	70	4	,,	,,	-	-	20	,,	30
4	,,	,,	-	-	50	,,	60	5	,,	,,	-	-	10	,,	20

Recoveries.

Thirteen pauper patients have been removed from the roll as recovered—9 males and 4 females. Four male patients, after a few months' residence in private dwellings, were certified as recovered and removed from the roll, and, as far as is known, are now self-supporting; 2 were so far improved that they could be suitably cared for in the ordinary wards of the poorhouse; the other 3 were removed to the hospital wards of their poorhouses for treatment for bodily ailments owing to the difficulty of getting sufficient medical care and nursing in the districts where they were boarded. Of the female patients, 2 were apparently perfect recoveries; 1 has so far recovered that her friends were willing to take her home and support her; and the other was removed to her parish hospital for treatment, having been certified recovered, although when I saw her a few months earlier she was a silent dement.

Removals from Roll.

These are 9 in number—5 males and 4 females. One man was able to work and earn his own living; 3 were to be supported by their parents, whose pecuniary circumstances had improved so as to enable them to undertake the responsibility; and the fifth was an old man, who was to be supported by his family. Of the female patients, 1, a young imbecile girl, lived with her cousin in a low part of a large town. The surroundings were considered unsuitable, and every effort was made to get the patient removed to the country. The guardian would not part with her, and as all attempts on the part of the parish officials to effect her removal to better surroundings failed, her name was removed from the roll, the Parish Council having satisfied themselves that she would suffer no privation. Another (slightly imbecile), aged 30, had been with her guardian six years and proved so useful that her services were considered ample return for her board and clothing. A third was a young woman, not much improved, who went home to the care of her mother; the fourth was an elderly married woman, slightly demented, who went home and is quite able to keep house for herself and husband.

Removals to Establishments.

These number 42, an equal number of male and female patients. Of the male patients, 9 were returned to the asylum within a year of their discharge—most of them within a few months—having proved quite unsuitable for private care; 3 had excited attacks, and guardians requested their removal; 3 more were returned to the ayslum owing to the death or failing health of the guardians; 1 (always regarded as a doubtful case) became unmanageable on the death of his mother; 1, an epileptic, was said to have attempted suicide; 1 was a wanderer and troublesome on that account; 2 were returned as requiring medical care; and 1, a boy, was sent at my request to Baldovan Institution.

Of the female patients, 11 were returned to the asylum as unmanageable. The majority of these had only been a very short time in private dwellings, and in one or two at least of the cases the fault lay more with the guardian than the patient. Four were sent to the hospital on account of bodily illness for treatment; 4 on account of increasing dementia and dirty habits; and 1 was sent in on account of wandering habits. The remaining one was sent to the asylum by order of the Board, as recommended in my report. This is the

only case in which I have ever known restraint to be used in a private dwelling. The patient was a young woman living with her parents, and on two occasions I found her with a light chain fastened round her ankle, the other end being fastened to the kitchen table. The excuse made was that unless they did this or were constantly on the watch she ran away. I was unable to accept this excuse, although I have every reason to believe that in all other respects the girl was treated with great kindness.

ACCIDENTS.

These, I regret to say, are rather more numerous than usual :—

(1) A young man, boarded at a farm near Lanark, was in the habit of taking the cattle out on the common every day and had to drive them over a railway level-crossing. From all accounts his imbecility was slight, and he took a great interest in this work. (He had not been boarded here long and had not been visited.) On the morning of the accident, in the month of June, he had taken the cattle out as usual and was returning home. He stood on the railway, it is said, looking at an engine which stood in a siding not far from the crossing, and while there an engine, coming from the direction opposite to that in which he was looking, struck him and hurled him against the fence, killing him instantaneously. A full investigation was made by the Procurator-Fiscal, and as a result blame was attached to no one. It was purely accidental, and might have happened to a sane man.

(2) An elderly epileptic male patient, somewhat demented, and who for many years had been admirably cared for by his wife, was left sitting alone near his bedroom fire reading a newspaper while his wife went out to do the usual shopping. A passer-by saw smoke issuing from the window, and on opening the door the patient was found lying on the hearth before the fire dead, and his clothing burning. It is thought he must have taken a fit and fallen forward, when his newspaper took fire and ignited his clothing. His wife was said to have been absent less than half an hour.

(3) An old woman, 77 years of age, living in a remote Highland district, accidentally fell and sustained a fracture of the neck of the left femur. She was removed, with the consent of the Board, to the poorhouse hospital at Oban for better surgical care, but died there at the end of seven weeks, the cause of death being stated as fracture of the neck of the femur and exhaustion.

Minor accidents have been so trivial as to require no notice, and I am happy again to report that there have been no sexual accidents.

At the request of the Medical Commissioners, I also visited the Midlothian and Peebles District Asylum and the Haddington District Asylum with the view of assisting the Superintendents in boarding out suitable patients. There is always great difficulty in getting suitable homes in these districts, and in the case of many of the Inspectors of Poor there is apathy, and in some cases distinct antagonism, to any proposals for the removal of unrecovered patients. After selecting suitable patients I visited the Inspectors of the parishes to which they were chargeable. In the case of the Midlothian Asylum the work was followed by a moderate amount of success, but the work in connection with Haddington Asylum has hitherto been fruitless. Several Inspectors promised to take action, but nothing has been done. In one case I told an Inspector of a very suitable home for his one female patient, within a few miles of his own parish, but his Council have not made use of the information. This attitude is much to be regretted, as the asylum is overcrowded and has many cases which do not require and cannot be benefited by asylum care. I understand that the provision of additional asylum accommodation is under consideration at present. With energetic and concerted action on the part of the Superintendent and the Inspectors of Poor, a large number of chronic patients might be provided for in private dwellings, and the necessity for expenditure on additional buildings would be at least delayed. It was pointed out that, although there might be great difficulty in securing homes for a large number in East Lothian, there would be no great difficulty in finding suitable homes in other counties, as has been done with conspicuous success by the Inspectors of many of the larger parishes in Scotland, but it seems impossible to convince the Councils of the smaller parishes that any action of theirs in the removal of one or perhaps two patients can relieve the pressure on the asylum accommodation to an appreci-

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able extent. They seem to forget that when every parish in the district follows the same course the aggregate result is large. Possibly if the Medical Officer of the asylum made use of the powers conferred upon him by Section 17 of 25 & 26 Vic., c. 54, in one or two cases the result might be a good deal more activity on the part of the Parish Councils.

Insanity in the Long Island.

An enquiry made by the Board for the purpose of providing information for the Crofters Commission regarding lunacy in the parishes of North and South Uist, brought out some curious facts as to the marked difference in the amount of the insanity in these parishes, where, from contiguity, similarity of surroundings, and occupation, one would naturally have expected there would be little or no difference. These facts are set down clearly at pages lxvi-lxxvi of the 46th Report of the General Board, and need not be repeated here. It was thought desirable that during my annual visit to this part of my district I should make some enquiry with the view of ascertaining (1) whether this difference was a real or only an apparent one, and (2) if real, whether there were facts in either case which might throw light upon the excess of insanity in North as compared with South Uist. I have been careful to get my information from as many different sources as possible, and I am greatly indebted to clergymen, doctors, inspectors of poor, and others for much valuable assistance.

The two parishes, though separated at high water, are connected for several hours each tide, and communication either by driving or walking is constant between them. There are a few large farms in both parishes, but the great mass of the population are crofters, who make their living mostly by the land, a comparatively small number in both the islands being regularly engaged at fishing. A number of the young men in both islands belong to the militia or some of the yeomanry corps recently formed, and go away annually for a few weeks' drill, and some from both parishes go as hired men to the East Coast herring fishing. As regards material comfort, there is a consensus of opinion that the North Uist crofter is, on the whole, better off than his Southern neighbour, much of the better land there being in the hands of the crofters, whereas in South Uist it is said the best land is in the large farms. This somewhat better financial position might be expected to diminish the amount of pauper insanity, as the relatives of imbeciles would be better able to support them at home, and if this superiority had been found in South instead of North Uist it would have gone a long way to account for the difference in the ratio of chargeable insanity. As it is, it only accentuates the difference.

All my enquiries tended to confirm the statistics given in Table IV., page 70, of last year's Report as to the number in each parish insane or imbecile, but not officially known to the Board, and I think it is beyond the possibility of dispute that the real amount of insanity is very much greater in North than in South Uist.

In attempting to discuss the causes of the differences we may at once exclude the effects of migration and loss of population, as these recognised causes of an increased ratio of insanity are almost equally operative in both parishes.

For the purpose of this enquiry I have taken all the cases of insanity in the two parishes, known to the Board, and tabulated their histories as fully as possible. To make it more complete I have also included the parish of Barra, lying to the south of South Uist, and which shows a still more marked difference for the better in its insanity statistics.

NORTH UIST.

No.	Sex.	Religion.	Whether Insanity (1) has existed from Birth or Childhood, or (2) first occurred in Adult life, and form of Insanity.	Whether Patient is the Offspring of Parents who were 1st, 2nd, or 3rd Cousins, or not related.	Family History and Relationship (if any) to other Insane Persons.	Remarks.
1	F.	Protestant.	Adult. Acute Mania.	Parents 1st cousins.	Brother in asylum. Is 2nd cousin of Nos. 12 and 13; aunt of No. 22. Daughter was insane for short period; also two 1st cousins and another cousin committed suicide.	The taint in this case seems to affect many families in the parish.
2	M.	Protestant.	Adult. Religious Melancholia.	Parents not related.	Two cousins insane. Many cousins on maternal side mentally unstable. Insanity in families of both parents.	
3	F.	Protestant.	Congenital.	Illegitimate parents, not related as far as known.	Father and mother both imbecile. Patient is the mother of Nos. 21 and 25.	
4	F.	Protestant.	Adult. Mania with delusions of persecution.	Parents not related.	Had a sister insane at one time—now well. No other history.	
5	M.	Protestant.	Adult. Religious Mania.	Parents 2nd cousins.	Sister's children (2) imbecile. Mental instability without actual insanity present in several relatives.	
6	F.	Protestant.	Adult. Acute Mania.	Parents not related.	Sister died insane; had a brother in asylum for some time—now recovered.	
7	F.	Protestant.	Adult. Melancholia.	Parents not related.	Mother's brother died in asylum, and his son was in asylum; father's brother died in asylum; another brother committed suicide; 1st cousin on father's side was in the asylum.	The taint here also affects many families throughout the parish.
8	F.	Protestant.	Adult. Acute Mania (recurrent).	Parents not related. Mother from Barra.	Is a sister of No. 24. Her brother somewhat weak-minded and deaf.	Mother was hydrocephalic. Father rather weak-minded.

NORTH UIST—*continued.*

No.	Sex.	Religion.	Whether Insanity (1) has existed from Birth or Childhood, or (2) first occurred in Adult life, and form of Insanity.	Whether Patient is the Offspring of Parents who were 1st, 2nd, or 3rd Cousins, or not related.	Family History and Relationship (if any) to other Insane Persons.	Remarks.
9	M.	Protestant.	Adult. Mania with religious delusions.	Parents not related. Mother from Skye.	Is a brother of No. 16 and No. 23; another sister insane now. Maternal aunt was insane for a short time; a half brother of patient's was also insane.	
10	M.	Protestant.	Adult. Mania with suspicion.	Parents said to be not related, but information not absolutely reliable.	Aunt insane for a short time. Her daughter insane now. Cousin died in asylum.	Alcoholic.
11	M.	Protestant.	Adult, but was always simple. (Delusional.)	Parents not related.	Two brothers were imbecile; sister had an attack of puerperal insanity; two 1st cousins mentally unstable.	
12	M.	Protestant.	Adult. Religious Melancholia.	Parents not related.	Is cousin of No. 1 and No. 13; supposed to be uncle of No. 30.	Alcoholic.
13	M.	Protestant.	Adult. Mania with delusions.	Parents related (probably 2nd cousins).	Is 1st cousin of Nos. 14 and 15; 2nd cousin of No. 1, and related to all under No. 1.	
14	M.	Protestant.	Adult. Melancholia with excitement and religious delusions.	Parents 2nd cousins.	Brother in asylum; another brother and sister were insane for short periods. Is 1st cousin of No. 13 and No. 15; other two 1st cousins have been in asylums.	Attempted suicide.
15	F.	Protestant.	Adult. Acute Mania.	Parents not related.	Two sisters have been insane; also an aunt. Is 1st cousin to Nos. 13 and 14. Another 1st cousin is imbecile.	Taint on both paternal and maternal sides.
16	F.	Protestant.	Adult. Acute Melancholia with excitement.	Parents not related.	Is sister of No. 9 and No. 23. (See No. 9.)	
17	M.	Protestant.	Adult. Melancholia with Dementia.	Parents not related.	Maternal aunt was in the asylum; so was a 3rd cousin.	
18	F.	Protestant.	Adult. Mania with delusions.	Parents not related.	Insanity on paternal and maternal sides. All insane relatives now dead.	

19	F.	Protestant.	Adult. Puerperal Mania.	Parents not related.	Distantly related to No. 6. Aunt mentally unstable. Family tubercular.	
20	M.	Protestant.	Adult. Chronic Mania.	Parents not related.	1st cousin in asylum.	An old soldier. Had sunstroke in India.
21	M.	Protestant.	Birth. Congenital Imbecility.	Not so far as known. Illegitimate.)	Son of No. 3 ; half-brother of No. 25. (See No. 3.)	
22	M.	Protestant.	Birth. Congenital Imbecility.	Parents not related. (Illegitimate.)	Is a grand-nephew of No. 1 ; also near relative of No. 13 on maternal side. Reputed father said to be simple.	
23	M.	Protestant.	Adult. Mania with delusions.	Parents not related.	Brother of Nos. 9 and 16. (See No. 9 for other relationships.)	
24	F.	Protestant.	Birth. Idiocy.	Parents not related. Mother from Barra.	Sister of No. 8—which see.	Malformed dwarf.
25	F.	Protestant.	Birth. Idiocy.	Parents not known to be related. (Illegitimate.)	Daughter of No. 2—which see. Half-sister of No. 21.	
26	F.	Protestant.	Adult. Senile Dementia.	Parents not related.	Members of father's family weak-minded. Insanity at first took the form of religious mania.	
27	F.	Protestant.	Adult. Always weak-minded.	Parents 1st cousins.	1st cousin in asylum. Half-sister is insane, and a brother somewhat imbecile.	
28	F.	Protestant.	Adolescent Mania.	Parents 3rd cousins.	Insanity in families of both parents. Sister died insane. All insane relatives now dead.	
29	M.	Protestant.	Adult. Was probably always slightly imbecile, but for years was a good tradesman.	Parents not related.	No history obtainable. He has no relatives living in the parish.	
30	F.	Protestant.	Birth. Epileptic Idiot.	Parents not related. (Illegitimate.)	Mother weak-minded. Sister died of some nervous affection in the Poorhouse. Reputed father was a brother of No. 12; is 2nd cousin of Nos. 1, 13, and 14.	

SOUTH UIST.

No.	Sex.	Religion.	Whether Insanity (1) has existed from Birth or Childhood, or (2) first occurred in Adult life, and form of Insanity.	Whether Patient is the Offspring of Parents who were 1st, 2nd, or 3rd Cousins, or not related.	Family History and Relationship (if any) to other Insane Persons.	Remarks.
1	F.	R.C.	Weak-minded from birth. Mania.	Parents not related. Mother from North Uist.	Brother and sister all weak-minded, but self-supporting.	
2	M.	Protestant.	Adult. Religious Melancholia with depression.	Parents not related. Father from Skye.	One brother insane.	
3	F.	R.C.	Adult. Mania with delusions.	Parents not related.	Some of his paternal relations weak-minded.	
4	M.	R.C.	Adult. Melancholia with delusions.	Parents not related.	1st cousin of Nos. 5 and 20. Related to Nos. 6, 18, 19, 22, 23, 24, and 26.	
5	F.	R.C.	Adult. Mania with Dementia.		1st cousin of No. 4. Related to all under No. 4.	
6	M.	R.C.	Birth. Congenital Imbecility.	Parents not related.	Related to all under No. 4.	
7	F.	R.C.	Adult. Epileptic Mania.	Parents not related.	1st cousin of No. 12. Uncle died in the asylum.	
8	F.	R.C.	Adult. Melancholia with delusions.	Parents not related. Mother from North Uist.	Other members of the family weak-minded, but self-supporting.	
9	M.	R.C.	Adult. Melancholia with delusions.	Parents not related.	2nd cousin committed suicide. Grandmother from North Uist. All insanity in relatives can be traced to her.	
10	F.	Protestant.	Adult. Melancholia with excitement.	Parents 2nd or 3rd cousins.	A large number of her relations peculiar and mentally unstable.	Family originally from North Uist.
11	M.	R.C.	Adult. Mania with suspicion.	No information obtainable.	No information. Father and mother from Harris.	Alcoholic.

12	M.	R.C.	Adult. Melancholia with delusions of persecution.	Parents not related.		1st cousin of No. 7. Maternal uncle was insane; other relatives peculiar.	
13	F.	R.C.	Adult. Melancholia.	Parents not related.		Mother demented for a few years before her death.	Not native born.
14	M.	Protestant.	Childhood.	Parents not related.		Uncle insane.	
15	F.	R.C.	Adult.	Parents not related.		1st cousin insane. Both paternal and maternal relatives peculiar and mentally weak.	
16	M.	R.C.	Birth. Imbecility.	Parents not related.		Brother imbecile. Other relations peculiar and weak-minded.	
17	F.	Protestant.	Birth. Imbecility.	Parents not related.		No history of insanity on either side of this family.	Parents from Harris.
18	M.	R.C.	Birth. Imbecility.	Parents not related.		1st cousin of Nos. 4 and 6. Related to all under No. 4.	
19	M.	R.C.	Birth. Imbecility.	Parents not related.		2nd cousin of No. 5. Related to all under No. 4.	
20	F.	R.C.	Birth. Imbecility.	Parents not related.		1st cousin of No. 4. Related to all under No. 4.	
21	F.	R.C.	Birth. Imbecility.	Parents not related.		Some maternal relatives insane.	
22	M.	R.C.	Birth. Idiocy.	Parents 2nd cousins.		Related to all under No. 4.	
23	M.	R.C.	Birth. Idiocy.	Parents not related.		2nd cousin of Nos. 4, 6, and 24. Related to all others under No. 4.	
24	M.	R.C.	Birth. Imbecility.	Parents not related.		2nd cousin of Nos. 6 and 23. Related to No. 4, and all under No. 4.	
25	M.	R.C.	Birth. Imbecility.	Parents not related.	Father from North Uist.	Some of his father's relatives weak-minded.	
26	F.	R.C.	Birth. Imbecility.	Parents not related.		Related on mother's side to all under No. 4.	Epileptic.

BARRA.

No.	Sex.	Religion.	Whether Insanity (1) has existed from Birth or Childhood, or (2) first occurred in Adult life, and form of Insanity.	Whether Patient is the Offspring of Parents who were 1st, 2nd, or 3rd Cousins, or not related.	Family History and Relationship (if any) to other Insane Persons.	Remarks.
1	F.	R.C.	Adult. Acute Melancholia.	Parents not related.	Patient became insane after puerperal fever. An aunt was in asylum for a short period.	
	F.	R.C.	Adult. Melancholia with delusions.	Parents not related.	Not known to be related to any insane person.	
3	F.	Protestant.	Adult. Demented; always silly.	Parents not related.	Sister insane for a short time. Grandmother very silly.	North Uist people.
4	M.	R.C.	Adult. Mania with delusions (recurrent).	Parents not related.	Grandfather slightly imbecile.	
5	M.	R.C.	Adult. Dementia.	Parents not related.	Traumatic, the result of a blow on head. No relatives known to have been insane.	
6	F.	R.C.	Adult. Recurrent Mania.	Parents not related.	Had a sister insane.	
7	M.	R.C.	Adult. Dementia with suspicion; always weak-minded.	Parents not related.	Patient was always weak-minded. 1st cousin was insane.	
8	M.	R.C.	Adult. Acute primary Dementia.	Parents not related.		

Expressed in proportion of pauper lunatics per 10,000 of population, for convenience of comparison with other places, these Tables show :— Appendix C. Reports on Patients in Private Dwellings.

North Uist,	. . . .	77	per 10,000
South Uist,	. . . .	47	,, ,,
Barra,	. . . . .	31·4	,, ,,

This shows North Uist high above the highest county in Scotland ; South Uist equal to the seventh highest county in Scotland ; and Barra as near as possible the mean for Scotland. Report by Dr. Charles Macpherson.

On looking over these Tables the first striking feature is the comparative rarity of close intermarriage. It has long been generally believed that close intermarriage was one of the most fruitful causes of insanity and imbecility among island communities, but here we have in 64 cases, all the known lunacy of these island parishes, only two cases where the parents were first cousins and six where they were second and third cousins. Six of these belong to North Uist, two (2nd cousins) to South Uist, and none to Barra. But while there is not the close relationship that one almost expected between the parents of the insane in many of these cases, it is evident that many of them are the progeny of parents either on the paternal or maternal side, whose heredity is such that thoroughly healthy children could not reasonably be expected. In evidence of this we have in North Uist a connection more or less near between Nos. 1, 12, 13, 14, 15, 22, and 30. There is also the deplorable history of No. 3, with her children Nos. 21 and 25 ; and the cases of Nos. 8 and 24, daughters of a weak-minded father and a hydrocephalic mother. But while there is this strong evidence of a hereditary taint and an absence of all care in selection of marriage, which, if followed far enough back, would, I believe, show that probably two families are mainly responsible for the insanity of the parish ; yet it does not furnish us with any explanation of the marked difference in the ratio of insanity in the two parishes, as a glance at the Table referring to South Uist will show that Nos. 4, 5, 6, 18, 19, 22, 24, and 26 are all, more or less, nearly related, and probably derive their taint from one or other of two families. It is thus evident that as far as heredity is concerned the conditions are as bad in the one parish as the other.

So far as I was able to learn, very few South Uist women go as wives to North Uist, but a number of North Uist people seem at different times to have made their way south, *e.g.*, Nos. 1 and 8 in South Uist table, mothers were from North Uist ; No. 25, father from North Uist ; Nos. 9 and 10, family originally from North Uist ; and the taint in these cases is said to be due to the North Uist connection. Then in Barra, No. 3—North Uist people. This only makes the marked differences between the parishes the more astonishing, for if you eliminate the cases in South Uist connected with North Uist, and which presumably derive their bad heredity from this connection, and case No. 13, which has no connection by birth or parentage with the district, you reduce the number of the insane belonging to South Uist to a rate very nearly the mean for all Scotland and thus place it very much in the same position as Barra. I have not said anything regarding alcohol, because as far as I could learn there is practically no difference between the parishes in this respect, and as a cause of insanity alcohol does not bulk largely in these islands.

When we leave the question of heredity, and bad selection in marriage, the points of similarity in the insanity of these neighbouring parishes are exhausted. In North Uist six of the cases are congenital, and 24 are cases occurring in adult life. In four of these latter cases there is reason to believe that the patients were always weak-minded, but not to such an extent as made them unfit for ordinary freedom and some usefulness. In South Uist we have 13 congenitally imbecile or idiotic, and 13 cases occurring in adult life one of whom was always regarded as weak-minded. In Barra all are certified as having become insane in adult life, but in two of the eight cases there seems to have been always a degree of imbecility. We have, then, in North Uist as nearly as possible three times the amount of occurring insanity that we have in South Uist in proportion to the population. Everything seems to point to the presence of an exciting cause in North which does not exist in South Uist, for I have, I think, shown that the predisposing cause—heredity—is just as prevalent in South Uist as it is in North Uist, and there is no such difference in the mode of life, occupation, and general surroundings as would in any way account for this difference in the occurring insanity.

The only marked difference that one can trace between the social life of these parishes is the difference of religion. Had the statistics shown that close inter-marriage was markedly more frequent in North than in South Uist one would be apt to conclude that the more stringent rule of the Roman Catholic Church, which prohibits the marriage of first, second, or third cousins, accounted for the difference. But the figures do not countenance any such contention. Has, then, the religious difference anything to do with the great difference in the occurring insanity? This is a question on which much might be written on both sides, but which, in the nature of things, does not admit the production of definite proof, and an official report is scarcely suitable for the discussion of highly debatable questions.

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